

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS 21 PM 5:06

RECEIVED FEC MAIL CENTER 2015 JUL 20 PM 12:30

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Thom Tillis Committee

ADDRESS (number and street)

PO Box 97396

Check if different than previously reported. (ACC)

Raleigh

NC

27624

2. FEC IDENTIFICATION NUMBER

C C00545772

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

ZIP CODE

STATE DISTRICT

NC

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period

MM/DD/YYYY 04/01/2015

through

MM/DD/YYYY 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 Collin McMichael

Signature of Treasurer

Handwritten signature of Collin McMichael

Date

MM/DD/YYYY 07/15/2015

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

Table with 10 columns and 1 row for Office Use Only

FEC FORM 3 (Revised 02/2003)

201507220200228686

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Thom Tillis Committee**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	95675.00	806071.54
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	44381.16
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	95675.00	761690.38
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	171294.77	1298494.81
(b) Total Offsets to Operating Expenditures (from Line 14)...	30354.09	36588.76
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	140940.68	1261906.05
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	162663.91	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	374953.77	

**For further information contact:**

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

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

20150720200228687

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 57

Write or Type Committee Name  
**Thom Tillis Committee**

Report Covering the Period: From: MM / DD / YYYY 04 / 01 / 2015 To: MM / DD / YYYY 06 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	33550.00	168425.00
(i) Itemized (use Schedule A) ...	125.00	7043.43
(ii) Unitemized .....	33675.00	175468.43
(iii) TOTAL of contributions from individuals .	0.00	0.00
(b) Political Party Committees...	62000.00	630603.11
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) The Candidate .....	95675.00	806071.54
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3338.94	34847.21
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
13. LOANS:	0.00	0.00
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..	30354.09	36588.76
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...	129368.03	877507.51

20150720200228688

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	171294.77	1298494.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	250000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	250000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	38381.16
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	44381.16
21. OTHER DISBURSEMENTS ...	150.00	2150.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	171444.77	1595025.97

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	204740.65
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	129368.03
25. SUBTOTAL (add Line 23 and Line 24)...	334108.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	171444.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	162663.91

20150720200228689

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3N

Transaction ID :

Schedule B includes all required memo entries for reimbursements. All additional reimbursements do not meet the \$200.00 per vendor aggregate threshold. Transfer from Thom Tillis Victory Committee on Line 12 is the pro-rata allocation of a voided stale dated check paid by the now terminated joint fundraising committee (Thom Tillis Victory Committee - C00564633) This distribution was split according to the pro-rata allocation for each joint fundraising committee participant. Thom Tillis Victory Committee has reported the activity accordingly.

Form/Schedule:

Transaction ID:

201507220200228690

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial) <b>MR. JAKE F. ARONOV</b>		Date of Receipt MM / DD / YYYY 06 / 08 / 2015	
Mailing Address <b>PO BOX 235000</b>		<b>Transaction ID : SA11.40272</b>	
City <b>MONTGOMERY</b>	State <b>AL</b>	Zip Code <b>36123-5000</b>	Amount of Each Receipt this Period 2500.00 <b>CONTRIBUTION</b>
FEC ID number of contributing federal political committee. <input type="checkbox"/> <input checked="" type="checkbox"/>			
Name of Employer <b>ARONOV</b>	Occupation <b>PRESIDENT</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00 <b>DEBT RETIREMENT</b>		

Full Name (Last, First, Middle Initial) <b>MR. OWEN ARONOV</b>		Date of Receipt MM / DD / YYYY 06 / 08 / 2015	
Mailing Address <b>2036 ALLENDALE ROAD</b>		<b>Transaction ID : SA11.40271</b>	
City <b>MONTGOMERY</b>	State <b>AL</b>	Zip Code <b>36111-1018</b>	Amount of Each Receipt this Period 2500.00 <b>CONTRIBUTION</b>
FEC ID number of contributing federal political committee. <input type="checkbox"/> <input checked="" type="checkbox"/>			
Name of Employer <b>ARONOV REAL ESTATE</b>	Occupation <b>OWNER</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00 <b>DEBT RETIREMENT</b>		

Full Name (Last, First, Middle Initial) <b>MS. MARGARET C. BINZER</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2015	
Mailing Address <b>4114 CHEROKEE AVENUE</b>		<b>Transaction ID : SA11.40283</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22312-</b>	Amount of Each Receipt this Period 1000.00 <b>CONTRIBUTION</b>
FEC ID number of contributing federal political committee. <input type="checkbox"/> <input checked="" type="checkbox"/>			
Name of Employer <b>POLSINELLI</b>	Occupation <b>ATTORNEY</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00 <b>DEBT RETIREMENT</b>		

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

20150720200228691

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID ALAN BOCKORNY**

Mailing Address **3101 S. BISHOP JONES PLACE**

City <b>SIOUX FALLS</b>	State <b>SD</b>	Zip Code <b>57103-4669</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>BOCKORNY PETRIZZO</b>	Occupation <b>CEO</b>
--	--------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
**05 / 19 / 2015**

**Transaction ID : SA11.40249**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**DOYCE BOESCH**

Mailing Address **4515 W STREET NW**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20007-1513</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF</b>	Occupation <b>GOVT RELATIONS</b>
---------------------------------	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
**05 / 02 / 2015**

**Transaction ID : SA11.40228**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **4515 W STREET NW**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20007-1513</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF</b>	Occupation <b>GOVT RELATIONS</b>
---------------------------------	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
**06 / 07 / 2015**

**Transaction ID : SA11.40267**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**1000.00**

20150720200228692

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 57			
	(check only one)			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**DOYCE BOESCH**

Mailing Address **4515 W STREET NW**

City **WASHINGTON** State **DC** Zip Code **20007-1513**

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

Name of Employer **SELF** Occupation **GOVT RELATIONS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
**06 / 20 / 2015**

Transaction ID : **SA11.40294**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. SALVATORE T. BRUNO**

Mailing Address **5353 SHERIDAN ROAD**

City **SUNOL** State **CA** Zip Code **94586-9503**

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

Name of Employer **LOCKHEED MARTIN** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**06 / 09 / 2015**

Transaction ID : **SA11.40284**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **823 ORONOCO STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314-2219**

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

Name of Employer **DAVIS & HARMAN, LLP** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**05 / 19 / 2015**

Transaction ID : **SA11.40251**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**1750.00**

20150720200228693



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY CARMICHAEL**

Mailing Address **448 STABLE VIEW CIRCLE**

City **CHATTANOOGA** State **TN** Zip Code **37405-1238**

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

Name of Employer **ROCKBRIDGE SENIOR LIVING GROUP** Occupation **COO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**06 / 25 / 2015**

Transaction ID : **SA11.40298**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MISSISSIPPI BAND OF CHOCTAW INDIANS**

Mailing Address **PO BOX 6090**  
**101 INDUSTRIAL ROAD**

City **CHOCTAW** State **MS** Zip Code **39350-6090**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : **SA11.40305**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MANUS M. COONEY**

Mailing Address **8801 BEL AIR PLACE**

City **POTOMAC** State **MD** Zip Code **20854-1604**

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

Name of Employer **AMERICAN CONTINENTAL GROUP** Occupation **PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**05 / 26 / 2015**

Transaction ID : **SA11.40264**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**2000.00**

201507220200228694

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 57			
	(check only one)			
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial) <b>MR. ALEXANDER R. DAHL</b>			Date of Receipt MM / DD / YYYY 05 / 19 / 2015	
Mailing Address <b>3101 N. THOMAS STREET</b>			<b>Transaction ID : SA11.40258</b>	
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22207-4120</b>	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
Name of Employer <b>BROWNSTEIN HYATT FARBER</b>		Occupation <b>ATTORNEY</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
			DEBT RETIREMENT	

Full Name (Last, First, Middle Initial) <b>MR. MARK R. DISLER</b>			Date of Receipt MM / DD / YYYY 05 / 19 / 2015	
Mailing Address <b>6414 NEEDLE LEAK DRIVE</b>			<b>Transaction ID : SA11.40245</b>	
City <b>ROCKVILLE</b>	State <b>MD</b>	Zip Code <b>20852-4150</b>	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
Name of Employer <b>PRIME POLICY GROUP</b>		Occupation <b>GOVERNMENT POLICY</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
			DEBT RETIREMENT	

Full Name (Last, First, Middle Initial) <b>MR. J. BRAD EDWARDS</b>			Date of Receipt MM / DD / YYYY 06 / 09 / 2015	
Mailing Address <b>403 LLOYDS LANE</b>			<b>Transaction ID : SA11.40282</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22302-3712</b>	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION		
Name of Employer <b>JENKINS HILL CONSULTING</b>		Occupation <b>MANAGING PARTNER</b>		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
			DEBT RETIREMENT	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

20150720200228695

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 57	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. JONATHAN L. ETHERTON</b>			Date of Receipt MM / DD / YYYY 05 / 19 / 2015	
Mailing Address <b>6902 BRIGHT AVENUE</b>			<b>Transaction ID : SA11.40256</b>	
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101-2101</b>	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C			CONTRIBUTION	
Name of Employer <b>ETHERTON AND ASSOCIATES, INC.</b>		Occupation <b>GOVERNMENT RELATIONS</b>	DEBT RETIREMENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DIANE FRANCO</b>			Date of Receipt MM / DD / YYYY 04 / 22 / 2015	
Mailing Address <b>524 METAIRIE ROAD</b>			<b>Transaction ID : SA11.40226</b>	
City <b>METAIRIE</b>	State <b>LA</b>	Zip Code <b>70005-4308</b>	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C			CONTRIBUTION	
Name of Employer <b>NOT EMPLOYED</b>		Occupation <b>NOT EMPLOYED</b>	DEBT RETIREMENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MARC GOLDMAN</b>			Date of Receipt MM / DD / YYYY 05 / 26 / 2015	
Mailing Address <b>BOX 8020</b>			<b>Transaction ID : SA11.40261</b>	
City <b>GARDEN CITY</b>	State <b>NY</b>	Zip Code <b>11530-8020</b>	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <input type="checkbox"/> C			CONTRIBUTION	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	DEBT RETIREMENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	

20150720200228696

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 57
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN GREEN**

Mailing Address **431 TURNBERRY CT**

City <b>OXFORD</b>	State <b>MS</b>	Zip Code <b>38655-2578</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>CROSSROADS STRATEGIES</b>	Occupation <b>CEO</b>
--	--------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

MM	DD	YYYY
06	12	2015

Transaction ID : **SA11.40288**

Amount of Each Receipt this Period  

250.00
--------

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MRS. VICKI HART**

Mailing Address **701 8TH STREET NW FLOOR 5**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20001-3958</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>HART HEALTH STRATEGIES</b>	Occupation <b>PRESIDENT</b>
---	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  

MM	DD	YYYY
05	19	2015

Transaction ID : **SA11.40255**

Amount of Each Receipt this Period  

500.00
--------

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID W. HOBBS**

Mailing Address **300 NEW JERSEY AVENUE NW SUITE 601**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20001-2080</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>THE HOBBS GROUP</b>	Occupation <b>PRESIDENT</b>
--	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  

MM	DD	YYYY
05	19	2015

Transaction ID : **SA11.40248**

Amount of Each Receipt this Period  

1000.00
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CONTRIBUTION

DEBT RETIREMENT

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

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

1750.00
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201507220200228697

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD O. HOLLINGSWORTH**

Mailing Address **3003 MILLER HEIGHTS ROAD**

City <b>OAKTON</b>	State <b>VA</b>	Zip Code <b>22124-1822</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>COMPASS GROUP, LLC</b>	Occupation <b>CONSULTANT</b>
---	---------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  

MM	DD	YYYY
06	09	2015

Transaction ID : **SA11.40285**

Amount of Each Receipt this Period  

500.00
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CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. STACEY HUGHES**

Mailing Address **314 N GARFIELD ST**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201-1231</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>THE NICKLES GROUP</b>	Occupation <b>PARTNER</b>
--	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**3600.00**

Date of Receipt  

MM	DD	YYYY
05	19	2015

Transaction ID : **SA11.40247**

Amount of Each Receipt this Period  

1000.00
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CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES E. HYLAND**

Mailing Address **1101 PENNSYLVANIA AVENUE NW**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004-2504</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>PENNSYLVANIA AVENUE GROUP</b>	Occupation <b>EXECUTIVE</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

MM	DD	YYYY
05	19	2015

Transaction ID : **SA11.40250**

Amount of Each Receipt this Period  

500.00
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CONTRIBUTION

DEBT RETIREMENT

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

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

2000.00
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20150720200228698

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 57
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALEIX JARVIS**

Mailing Address 1306 CLAYBORNE HOUSE CT

City MCLEAN	State VA	Zip Code 22101-2402
----------------	-------------	------------------------

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

Name of Employer FIERCE ISAKOWITZ	Occupation PARTNER
--------------------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2015

Transaction ID : SA11.40262

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH J. KIES**

Mailing Address 6109 FRANKLIN PARK RD.

City MCLEAN	State VA	Zip Code 22101-4214
----------------	-------------	------------------------

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

Name of Employer FEDERAL POLICY GROUP	Occupation MANAGING DIRECTOR
--	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

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

Transaction ID : SA11.40302

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MS. DIANE M. MAJOR**

Mailing Address 2232 WESTWOOD PLACE

City FALLS CHURCH	State VA	Zip Code 22043-1619
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FEC ID number of contributing federal political committee. **C**

Name of Employer THE D MAJOR GROUP	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2015

Transaction ID : SA11.40254

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

DEBT RETIREMENT

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

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

3000.00

20150720200228699

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 OF 57	
	(check only one)			
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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. MCMICKLE**

Mailing Address **5614 CONNECTICUT AVENUE NW  
SUITE 204**

City **WASHINGTON** State **DC** Zip Code **20015-2604**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  

MM	DD	YYYY
06	29	2015

Transaction ID : **SA11.40303**

Amount of Each Receipt this Period  

500.00
--------

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. MILNE**

Mailing Address **409 G STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003-4257**

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

Name of Employer **CAPITAL MANAGEMENT** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  

MM	DD	YYYY
05	19	2015

Transaction ID : **SA11.40257**

Amount of Each Receipt this Period  

1000.00
---------

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **414 I ST. NE**

City **WASHINGTON** State **DC** Zip Code **20002-4344**

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

Name of Employer **PODESTA GROUP** Occupation **PRINCIPAL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  

MM	DD	YYYY
06	04	2015

Transaction ID : **SA11.40266**

Amount of Each Receipt this Period  

500.00
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CONTRIBUTION

DEBT RETIREMENT

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

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

2000.00
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20150720200228700

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

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

FOR LINE NUMBER: PAGE 16 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J. MORLEY**

Mailing Address **2515 N. UPLAND STREET**

City **ARLINGTON** State **VA** Zip Code **22207-4173**

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

Name of Employer **ALTRIUS GROUP** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 19 / 2015**

Transaction ID : **SA11.40253**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM MOSCHELLA**

Mailing Address **6712 MARBO COURT**

City **FALLS CHURCH** State **VA** Zip Code **22046-2353**

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

Name of Employer **BROWNSTEIN HYATT** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 19 / 2015**

Transaction ID : **SA11.40252**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MR. S. DAVIS PHILLIPS**

Mailing Address **24 VALLEYFIELDS FARM**

City **HIGH POINT** State **NC** Zip Code **27265-**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
**MM / DD / YYYY**  
**06 / 22 / 2015**

Transaction ID : **SA11.40296**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**3600.00**

20150720200228701



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

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

FOR LINE NUMBER: PAGE 17 OF 57  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN R. PHILLIPS**

Mailing Address **6205 PARKHILL DRIVE**

City **ALEXANDRIA** State **VA** Zip Code **22312-1161**

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

Name of Employer **D. L A PIPER, LLP** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 19 / 2015**

Transaction ID : **SA11.40246**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. RALPH D. PITTMAN**

Mailing Address **510 F STREET**

City **NORTH WILKESBORO** State **NC** Zip Code **28659-4342**

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

Name of Employer **RETIRED** Occupation **RETIRED POLICE CAPTAIN**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 06 / 2015**

Transaction ID : **SA11.40230**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY E. SAVARY-TAYLOR**

Mailing Address **409 MCARTHUR AVENUE NE**

City **VIENNA** State **VA** Zip Code **22180-3563**

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

Name of Employer **THE NICKLES GROUP** Occupation **VICE PRESIDENT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**06 / 24 / 2015**

Transaction ID : **SA11.40297**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**1350.00**

201507220200228702

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 OF 57	
	(check only one)	
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<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KRAIG M. SIRACUSE**

Mailing Address **2201 WOODMONT ROAD**

City **ALEXANDRIA** State **VA** Zip Code **22307-1157**

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

Name of Employer **PARK STRATEGIES, LLC** Occupation **MANAGING DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 09 / 2015**

Transaction ID : **SA11.40281**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MS. DONNA W. STERNBERG**

Mailing Address **P.O. BOX 98100**

City **BATON ROUGE** State **LA** Zip Code **70898-9100**

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

Name of Employer **STARMOUNT LIFE INSURANCE COMPANY** Occupation **OWNER, EXECUTIVE VICE PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 08 / 2015**

Transaction ID : **SA11.40273**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**MS. AMY H. SWONGER**

Mailing Address **5905 MOSS WOOD LANE**

City **MCLEAN** State **VA** Zip Code **22101-3300**

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

Name of Employer **WASHINGTON COUNCIL ERNST & YOUNG LI** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 09 / 2015**

Transaction ID : **SA11.40279**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**1750.00**

20150720200228703

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

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

FOR LINE NUMBER: PAGE 19 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**LINDA TARPLIN**

Mailing Address **2103 POWHATAN STREET**

City **FALLS CHURCH** State **VA** Zip Code **22043-1941**

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

Name of Employer **TARPLIN, DOWNS & YOUNG, LLC** Occupation **LOBBYIST**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**05 / 12 / 2015**

**Transaction ID : SA11.40235**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL A. TONGOUR**

Mailing Address **4937 TILDEN STREET, NW**

City **WASHINGTON** State **DC** Zip Code **20016-2331**

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

Name of Employer **T. C H GROUP** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**06 / 09 / 2015**

**Transaction ID : SA11.40280**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **6487 WARWICK CIRCLE**

City **ALEXANDRIA** State **VA** Zip Code **22315-3662**

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

Name of Employer **K&L GATES LLP** Occupation **ATTORNEY AT LAW**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**05 / 07 / 2015**

**Transaction ID : SA11.40231**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**1000.00**

20150720200228704

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

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

FOR LINE NUMBER: PAGE 20 OF 57  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**DARREN WILLCOX**

Mailing Address **9696 MILL RIDGE LANE**

City **GREAT FALLS** State **VA** Zip Code **22066-2300**

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

Name of Employer **W STRATEGIES** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**05 / 15 / 2015**

Transaction ID : **SA11.40238**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** 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)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

**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)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

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

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

**1000.00**

**33550.00**

20150720200228705

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

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

FOR LINE NUMBER: PAGE 21 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**BASF CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE**

Mailing Address **100 PARK AVENUE**

City **FLORHAM PARK** State **NJ** Zip Code **07932-1049**

FEC ID number of contributing federal political committee. **C00340075**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**05 / 11 / 2015**

Transaction ID : **SA11.40234**

Amount of Each Receipt this Period  
 **1000.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**BIOPEN, INC. POLITICAL ACTION COMMITTEE A.K.A. 'BIOPEN PAC'**

Mailing Address **225 BINNEY STREET**

City **CAMBRIDGE** State **MA** Zip Code **02142-1031**

FEC ID number of contributing federal political committee. **C00390351**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 MM /  DD /  YYYY  
**06 / 03 / 2015**

Transaction ID : **SA11.40265**

Amount of Each Receipt this Period  
 **2500.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('B**

Mailing Address **300 BOSTON SCIENTIFIC WAY**

City **MARLBOROUGH** State **MA** Zip Code **01752-1291**

FEC ID number of contributing federal political committee. **C00357863**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**06 / 15 / 2015**

Transaction ID : **SA11.40290**

Amount of Each Receipt this Period  
 **1000.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**4500.00**

201507220200228706

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 57	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. Full Name (Last, First, Middle Initial)**  
**CHARTER COMMUNICATIONS INC. PAC (CHARTERPAC)**

Mailing Address 12405 POWERSCOURT DRIVE

City	State	Zip Code
ST. LOUIS	MO	63131-3673

FEC ID number of contributing federal political committee. **C** C00356808

Name of Employer	Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2015

Transaction ID : SA11.40243

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B. Full Name (Last, First, Middle Initial)**  
**CONVERGYS CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 201 EAST 4TH STREET

City	State	Zip Code
CINCINNATI	OH	45202-4248

FEC ID number of contributing federal political committee. **C** C00350108

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2015

Transaction ID : SA11.40242

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

DEBT RETIREMENT

**C. Full Name (Last, First, Middle Initial)**  
**COVINGTON AND BURLING LLP PAC**

Mailing Address 1201 PENNSYLVANIA AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20004-2401

FEC ID number of contributing federal political committee. **C** C00462630

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
MM / DD / YYYY  
05 / 26 / 2015

Transaction ID : SA11.40263

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

DEBT RETIREMENT

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

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

3000.00

201507220200228707

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 23 OF 57	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**CTIA - THE WIRELESS ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **1400 16TH STREET NW  
SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20036-2225**

FEC ID number of contributing federal political committee. **C C00262295**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**06 / 29 / 2015**

Transaction ID : **SA11.40299**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CUMMINS INC. POLITICAL ACTION COMMITTEE (CIPAC)**

Mailing Address **601 PENNSYLVANIA AVENUE, NW  
NORTH BUILDING, SUITE 625**

City **WASHINGTON** State **DC** Zip Code **20004-2601**

FEC ID number of contributing federal political committee. **C C00377952**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**05 / 19 / 2015**

Transaction ID : **SA11.40244**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

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

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 C00327916**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**05 / 22 / 2015**

Transaction ID : **SA11.40260**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

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

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

**3000.00**

20150720200228708

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. Full Name (Last, First, Middle Initial)**  
**FMC CORPORATION GOOD GOVERNMENT PROGRAM**

Mailing Address **1050 K STREET, NW**  
**SUITE 600**

City **WASHINGTON** State **DC** Zip Code **20001-**

FEC ID number of contributing federal political committee. **C C00033704**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **MM / DD / YYYY**  
**06 / 22 / 2015**

Transaction ID : **SA11.40295**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

DEBT RETIREMENT

**B. Full Name (Last, First, Middle Initial)**  
**GILEAD SCIENCES INC HEALTHCARE POLICY PAC**

Mailing Address **333 LAKESIDE DRIVE**

City **FOSTER CITY** State **CA** Zip Code **94404-1147**

FEC ID number of contributing federal political committee. **C C00396895**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**04 / 21 / 2015**

Transaction ID : **SA11.40224**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **25 MASSACHUSETTS AVE, NW**  
**9TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20001-1430**

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **MM / DD / YYYY**  
**06 / 09 / 2015**

Transaction ID : **SA11.40277**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**8500.00**

20150720200228709



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**HILL-ROM HOLDINGS, INC. POLITICAL ACTION COMMITTEE (HRPAC)**

Mailing Address **1069 STATE ROAD 46 EAST**

City **BATESVILLE** State **IN** Zip Code **47006-7520**

FEC ID number of contributing federal political committee. **C C00448993**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**05 / 19 / 2015**

Transaction ID : **SA11.40241**

Amount of Each Receipt this Period  
 **1000.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT**

Mailing Address **800 17TH STREET, NW SUITE 1100**

City **WASHINGTON** State **DC** Zip Code **20006-3962**

FEC ID number of contributing federal political committee. **C C00171330**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt  
 MM /  DD /  YYYY  
**05 / 11 / 2015**

Transaction ID : **SA11.40233**

Amount of Each Receipt this Period  
 **1000.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHI)**

Mailing Address **300 M STREET S.E. SUITE 350**

City **300 M STREET S.E.** State **DC** Zip Code **20003-3436**

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

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**06 / 09 / 2015**

Transaction ID : **SA11.40286**

Amount of Each Receipt this Period  
 **1000.00**

CONTRIBUTION

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

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

**3000.00**

20150720200228710

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 57
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**IHEARTMEDIA, INC. - CLEAR CHANNEL OUTDOOR PAC**

Mailing Address **200 E. BASSE ROAD**

City **SAN ANTONIO** State **TX** Zip Code **78209-8328**

FEC ID number of contributing federal political committee. **C C00279216**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **06 / 29 / 2015**

**Transaction ID : SA11.40300**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INTERCONTINENTAL EXCHANGE INC PAC**

Mailing Address **5660 NEW NORTHSIDE DR. NW  
3RD FLOOR**

City **ATLANTA** State **GA** Zip Code **30328-5800**

FEC ID number of contributing federal political committee. **C C00443168**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **05 / 12 / 2015**

**Transaction ID : SA11.40237**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LINCOLN FINANCIAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address **116 EAST BERRY STREET  
PO BOX 960**

City **FORT WAYNE** State **IN** Zip Code **46802-2487**

FEC ID number of contributing federal political committee. **C C00167486**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **06 / 29 / 2015**

**Transaction ID : SA11.40301**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

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

**4500.00**

20150720200228711

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**LOUISIANA FOR AMERICAN SECURITY POLITICAL ACTION COMMITTEE**

Mailing Address **228 SAINT CHARLES AVENUE**  
**SUITE 1024**

City **NEW ORLEANS** State **LA** Zip Code **70130-2651**

FEC ID number of contributing federal political committee. **C C00144170**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 MM / DD / YYYY  
**06 / 15 / 2015**

Transaction ID : **SA11.40291**

Amount of Each Receipt this Period  
**2000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MEDNAX, INC. FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address **1301 CONCORD TERRACE**

City **SUNRISE** State **FL** Zip Code **33323-2843**

FEC ID number of contributing federal political committee. **C C00469205**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 MM / DD / YYYY  
**06 / 10 / 2015**

Transaction ID : **SA11.40287**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

DEBT RETIREMENT

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

Mailing Address **1501 M STREET NW**  
**SUITE 330**

City **WASHINGTON** State **DC** Zip Code **20005-1701**

FEC ID number of contributing federal political committee. **C C00457697**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 MM / DD / YYYY  
**04 / 21 / 2015**

Transaction ID : **SA11.40225**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

DEBT RETIREMENT

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

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

**9500.00**

201507220200228712

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

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

FOR LINE NUMBER: PAGE 28 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ACTION COMMITTEE (NACPAC)**

Mailing Address **3389 SHERIDAN ST.**  
**#424**

City **HOLLYWOOD** State **FL** Zip Code **33021-3606**

FEC ID number of contributing federal political committee. **C C00147983**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 08 / 2015**

Transaction ID : **SA11.40270**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COT**

Mailing Address **P.O. BOX 2995**

City **CORDOVA** State **TN** Zip Code **38088-2995**

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 08 / 2015**

Transaction ID : **SA11.40274**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**NATIONAL INSTALLMENT LENDERS ASSOCIATION PAC (NILA PAC)**

Mailing Address **P.O. BOX 65615**

City **WASHINGTON** State **DC** Zip Code **20035-5615**

FEC ID number of contributing federal political committee. **C C00465211**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
MM / DD / YYYY  
**06 / 16 / 2015**

Transaction ID : **SA11.40292**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

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

**4500.00**

20150720200228713

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 57			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **2055 L STREET, 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: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

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

Transaction ID : **SA11.40229**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION C**

Mailing Address **400 N. CAPITOL STREET NW SUITE 490**

City **WASHINGTON** State **DC** Zip Code **20001-6509**

FEC ID number of contributing federal political committee. **C C00480863**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**06 / 09 / 2015**

Transaction ID : **SA11.40275**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**

Mailing Address **920 MASSACHUSETTS AVE, NW SUITE 500**

City **WASHINGTON** State **DC** Zip Code **20001-4598**

FEC ID number of contributing federal political committee. **C C00424838**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : **SA11.40304**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

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

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

**4500.00**

201507220200228714

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**OUTDOOR AMUSEMENT BUSINESS ASSOCIATION INC POLITICAL ACTION**

Mailing Address 1035 S SEMORAN BLVD STE 1045A

City WINTER PARK	State FL	Zip Code 32792-5512
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00163212

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 09 / 2015

Transaction ID : SA11.40278

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

DEBT RETIREMENT

**B.** Full Name (Last, First, Middle Initial)  
**PETROLEUM MARKETERS ASSOCIATION / SMALL BUSINESS CMTE**

Mailing Address 1901 NORTH FORT MYER DRIVE  
SUITE 500

City ARLINGTON	State VA	Zip Code 22209-1609
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035204

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

Transaction ID : SA11.40293

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PURDUE PHARMA INC. POLITICAL ACTION COMMITTEE (PURDUE PAC)**

Mailing Address ONE STAMFORD FORUM

City STAMFORD	State CT	Zip Code 06901-3516
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00370643

Name of Employer	Occupation
------------------	------------

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2015

Transaction ID : SA11.40269

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

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

6000.00

201507220200228715

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

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

Mailing Address **PO BOX 15441**

City **WASHINGTON** State **DC** Zip Code **20003-0441**

FEC ID number of contributing federal political committee. **C C00507053**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

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

Transaction ID : **SA11.40239**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**QUALCOMM INCORPORATED POLITICAL ACTION COMMITTEE (QPAC)**

Mailing Address **1730 PENNSYLVANIA AVE. NW**

City **WASHINGTON** State **DC** Zip Code **20006-4706**

FEC ID number of contributing federal political committee. **C C00339085**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

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

Transaction ID : **SA11.40240**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

DEBT RETIREMENT

**C.** Full Name (Last, First, Middle Initial)  
**RAIN AND HAIL INSURANCE SOCIETY POLITICAL ACTION COMMITTEE**

Mailing Address **9200 NORTHPARK DRIVE SUITE 300**

City **JOHNSTON** State **IA** Zip Code **50131-3006**

FEC ID number of contributing federal political committee. **C C00279505**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**06 / 09 / 2015**

Transaction ID : **SA11.40276**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

DEBT RETIREMENT

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

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

**3000.00**

20150720200228716

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 57			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

A. Full Name (Last, First, Middle Initial)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Mailing Address **3930 PENDER DRIVE  
SUITE 340**

City **FAIRFAX** State **VA** Zip Code **22030-0986**

FEC ID number of contributing federal political committee. **C00120030**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **5000.00**

Date of Receipt  
 MM / DD / YYYY  
**05 / 20 / 2015**

Transaction ID : **SA11.40259**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**TE CONNECTIVITY, INC. POLITICAL ACTION COMMITTEE Telpac**

Mailing Address **607 14TH STREET NW  
STE. 250**

City **WASHINGTON** State **DC** Zip Code **20005-2072**

FEC ID number of contributing federal political committee. **C00433482**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

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

Transaction ID : **SA11.40306**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREME**

Mailing Address **601 THIRTEENTH STREET, NW  
SUITE 700 NORTH**

City **WASHINGTON** State **DC** Zip Code **20005-3807**

FEC ID number of contributing federal political committee. **C00431361**

Name of Employer Occupation

Receipt For: 2020  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**06 / 12 / 2015**

Transaction ID : **SA11.40289**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

**7000.00**

20150720200228717



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 57
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**TESSERA TECHNOLOGIES, INC. PAC**

Mailing Address **3025 ORCHARD PARKWAY**

City <b>SAN JOSE</b>	State <b>CA</b>	Zip Code <b>95134-2017</b>
-------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C C00443739**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**05 / 12 / 2015**

**Transaction ID : SA11.40236**

Amount of Each Receipt this Period  
**1000.00**

**CONTRIBUTION**

**DEBT RETIREMENT**

**B.** 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)

Election Cycle-to-Date

Date of Receipt  
**MM / DD / YYYY**

Amount of Each Receipt this Period

**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)

Election Cycle-to-Date

Date of Receipt  
**MM / DD / YYYY**

Amount of Each Receipt this Period

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

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

**1000.00**

**62000.00**

201507220200228718

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 34 OF 57
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**THOM TILLIS VICTORY COMMITTEE**

Mailing Address **PO BOX 97275**

City **RALEIGH** State **NC** Zip Code **27624-7275**

FEC ID number of contributing federal political committee. **C C00564633**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**784836.22**

Date of Receipt  

MM	DD	YYYY
06	26	2015

Transaction ID : **SA12.40313**

Amount of Each Receipt this Period  

3338.94
---------

CONTRIBUTION

PRO-RATA ALLOCATION OF VOIDED CHECK FROM TERMINATED JFC

**B.** Full Name (Last, First, Middle Initial)  
**TILLIS MAJORITY COMMITTEE**

Mailing Address **PO BOX 97275**

City **RALEIGH** State **NC** Zip Code **27624-7275**

FEC ID number of contributing federal political committee. **C C00572495**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4174.18**

Date of Receipt  

MM	DD	YYYY
06	30	2015

Transaction ID : **SA12.40307**

Amount of Each Receipt this Period  

0.00
------

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

Mailing Address **25461 W FREMONT RD**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-3538**

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

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFF** **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1300.00**

Date of Receipt  

MM	DD	YYYY
04	07	2015

Transaction ID : **SA12.40312**

Amount of Each Receipt this Period  

1300.00
---------

CONTRIBUTION

**[MEMO ITEM]**

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

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

3338.94

20150720200228719

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**PATRIOT COAL CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 12312 OLIVE BOULEVARD SUITE 400

City	State	Zip Code
ST. LOUIS	MO	63141-6448

FEC ID number of contributing federal political committee. **C** C00452524

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
7000.00

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

Transaction ID : SA12.40308

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**TILLIS MAJORITY COMMITTEE**

Mailing Address PO BOX 97275

City	State	Zip Code
RALEIGH	NC	27624-7275

FEC ID number of contributing federal political committee. **C** C00572495

Name of Employer	Occupation

Receipt For: 2020  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4174.18

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

Transaction ID : SA12.40309

Amount of Each Receipt this Period  
0.00

CONTRIBUTION

SEE ATTRIBUTION BELOW

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

Mailing Address 32512 ARCHDALE

City	State	Zip Code
CHAPEL HILL	NC	27517-8396

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2020  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

Transaction ID : SA12.40310

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

[MEMO ITEM]

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

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

0.00

3338.94

201507220200228720

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

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

FOR LINE NUMBER: PAGE 36 OF 57  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A.** Full Name (Last, First, Middle Initial)  
**ONMESSAGE, INC.**

Mailing Address **705 MELVIN AVE. #105**

City **ANNAPOLIS** State **MD** Zip Code **21401**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**30306.89**

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

**Transaction ID : NRIT.2444**

Amount of Each Receipt this Period  
 **30306.89**

**VENDOR REFUND**

**B.** 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)

Election Cycle-to-Date

Date of Receipt  
 MM /  DD /  YYYY

Amount of Each Receipt this Period

**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)

Election Cycle-to-Date

Date of Receipt  
 MM /  DD /  YYYY

Amount of Each Receipt this Period

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

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

**30306.89**

**30306.89**

20150720200228721

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. JORDAN P SHAW**

Full Name (Last, First, Middle Initial)  
Mailing Address 827 DANIELS ST

City RALEIGH State NC Zip Code 27605-3105

Purpose of Disbursement  
MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 06 / 2015

Amount of Each Disbursement this Period  
1000.00

Transaction ID : SB17.I2425

**B. JORDAN P SHAW**

Full Name (Last, First, Middle Initial)  
Mailing Address 827 DANIELS ST

City RALEIGH State NC Zip Code 27605-3105

Purpose of Disbursement  
MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 29 / 2015

Amount of Each Disbursement this Period  
1000.00

Transaction ID : SB17.I2432

**C. JORDAN P SHAW**

Full Name (Last, First, Middle Initial)  
Mailing Address 827 DANIELS ST

City RALEIGH State NC Zip Code 27605-3105

Purpose of Disbursement  
MANAGEMENT CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 10 / 2015

Amount of Each Disbursement this Period  
1000.00

Transaction ID : SB17.I2440

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

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

3000.00

201507220200228722

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (in Full)  
**Thom Tillis Committee**

**A. JASON UNDERWOOD**

Full Name (Last, First, Middle Initial)  
Mailing Address 3301 TRINITY RD

City LOUISVILLE State KY Zip Code 40206

Purpose of Disbursement REIMBURSEMENT: FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 260.76

Transaction ID : SB17.I2426

Category/Type

**B. OLD TOWN WINE AND SPIRITS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1529 BARDSTOWN RD

City LOUISVILLE State KY Zip Code 40205

Purpose of Disbursement FOOD/BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 260.76

Transaction ID : SB17.I2427

[MEMO ITEM]

Category/Type

**C. ALEXANDER'S FINE PORTRAIT DESIGN**

Full Name (Last, First, Middle Initial)  
Mailing Address 312 BIRDSAIL ST

City HOUSTON State TX Zip Code 77007

Purpose of Disbursement PHOTOGRAPHY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 29 / 2015

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.I2436

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 610.76

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

201507220200228723

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address **200 VESEY ST**

City **NEW YORK** State **NY** Zip Code **10281-1013**

Purpose of Disbursement  
**MERCHANT FEES**

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
04 / 03 / 2015

Amount of Each Disbursement this Period

180.08
--------

Transaction ID : **SB17.I2415**

**B. AMERICAN EXPRESS**

Mailing Address **200 VESEY ST**

City **NEW YORK** State **NY** Zip Code **10281-1013**

Purpose of Disbursement  
**MERCHANT FEES**

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 / 05 / 2015

Amount of Each Disbursement this Period

75.29
-------

Transaction ID : **SB17.I2416**

**C. AMERICAN EXPRESS**

Mailing Address **200 VESEY ST**

City **NEW YORK** State **NY** Zip Code **10281-1013**

Purpose of Disbursement  
**MERCHANT FEES**

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
06 / 05 / 2015

Amount of Each Disbursement this Period

74.30
-------

Transaction ID : **SB17.I2417**

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

329.67
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**TOTAL** This Period (last page this line number only).....

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201507220200228724

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2015

Amount of Each Disbursement this Period  
15.00

Transaction ID : SB17.I2419

Category/Type

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 21 / 2015

Amount of Each Disbursement this Period  
20.00

Transaction ID : SB17.I2428

Category/Type

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
05 / 01 / 2015

Amount of Each Disbursement this Period  
15.00

Transaction ID : SB17.I2433

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 50.00

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

2015072200228725



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
05 / 21 / 2015

Amount of Each Disbursement this Period  
20.00

Transaction ID : SB17.I2434

Category/Type

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 01 / 2015

Amount of Each Disbursement this Period  
15.00

Transaction ID : SB17.I2437

Category/Type

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 6659 FALLS OF NEUSE RD

City RALEIGH State NC Zip Code 27615-6816

Purpose of Disbursement  
BANK SERVICE FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 22 / 2015

Amount of Each Disbursement this Period  
20.00

Transaction ID : SB17.I2442

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 55.00

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

201507220200228726

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. BISTRO BIS**

Full Name (Last, First, Middle Initial)  
Mailing Address 15 E ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD / BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
06 / 12 / 2015

Amount of Each Disbursement this Period: 34.59

Transaction ID : SB17.I2404

**B. BOBBY VAN'S STEAKHOUSE**

Full Name (Last, First, Middle Initial)  
Mailing Address 230 PARK AVE

City NEW YORK State NY Zip Code 10169

Purpose of Disbursement FOOD / BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
06 / 11 / 2015

Amount of Each Disbursement this Period: 629.90

Transaction ID : SB17.I2403

**C. CAMBRIDGE ANALYTICA**

Full Name (Last, First, Middle Initial)  
Mailing Address THE NEWS CORP BUILDING  
1211 5TH AVE

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement MICRO-TARGETING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
04 / 01 / 2015

Amount of Each Disbursement this Period: 25000.00

Transaction ID : SB17.I2370

**SUBTOTAL** of Disbursements This Page (optional) ..... 25664.49

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

201507220200228727

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. CAMBRIDGE ANALYTICA**

Full Name (Last, First, Middle Initial)  
Mailing Address THE NEWS CORP BUILDING  
1211 5TH AVE

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement MICRO-TARGETING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 26 / 2015

Amount of Each Disbursement this Period: 25000.00

Transaction ID : SB17.I2424

**B. CAPITOL COMMUNICATIONS, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 876

City GRANITE FALLS State NC Zip Code 28630

Purpose of Disbursement MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 01 / 2015

Amount of Each Disbursement this Period: 25000.00

Transaction ID : SB17.I2420

**C. CM&CO, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 97275

City RALEIGH State NC Zip Code 27624-7275

Purpose of Disbursement ACCOUNTING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2015

Amount of Each Disbursement this Period: 8983.02

Transaction ID : SB17.I2438

**SUBTOTAL** of Disbursements This Page (optional) ..... 58983.02

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

20150720200228728

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
04 / 06 / 2015

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.I2372

Category/Type

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.I2384

Category/Type

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
06 / 04 / 2015

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.I2399

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 3750.00

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

201507220200228729

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. CMDI**

Full Name (Last, First, Middle Initial)  
Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement  
MERCHANT FEES

Candidate Name

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

State: District:

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

Amount of Each Disbursement this Period  
373.55

Transaction ID : SB17.I2418

Category/Type

**B. DISTINCTIVE STATIONERY**

Full Name (Last, First, Middle Initial)  
Mailing Address 204 AZAR CT

City BALTIMORE State MD Zip Code 21227

Purpose of Disbursement  
PAPER SUPPLIES

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 10 / 2015

Amount of Each Disbursement this Period  
1651.00

Transaction ID : SB17.I2441

Category/Type

**C. FEDEX OFFICE**

Full Name (Last, First, Middle Initial)  
Mailing Address 942 S SHADY GROVE RD

City MEMPHIS State TN Zip Code 38120-4117

Purpose of Disbursement  
SHIPPING

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 06 / 2015

Amount of Each Disbursement this Period  
39.23

Transaction ID : SB17.I2373

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 2063.78

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

201507220200228730

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. FEDEX OFFICE**

Full Name (Last, First, Middle Initial)  
Mailing Address **942 S SHADY GROVE RD**

City **MEMPHIS** State **TN** Zip Code **38120-4117**

Purpose of Disbursement **SHIPPING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
**06 / 19 / 2015**

Amount of Each Disbursement this Period: **29.56**

Transaction ID : **SB17.I2408**

Category/Type

**B. FREEDOM PARTNERS**

Full Name (Last, First, Middle Initial)  
Mailing Address **1515 N COURTHOUSE RD  
STE 610**

City **ARLINGTON** State **VA** Zip Code **22201**

Purpose of Disbursement **EVENT CATERING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
**04 / 01 / 2015**

Amount of Each Disbursement this Period: **1527.15**

Transaction ID : **SB17.I2421**

Category/Type

**C. H2 CAPITAL CONSULTING**

Full Name (Last, First, Middle Initial)  
Mailing Address **325 7TH ST, NW  
STE 400**

City **WASHINGTON** State **DC** Zip Code **20004**

Purpose of Disbursement **FUNDRAISING CONSULTING, EVENT CATERING, SHIPPING,  
TRANSPORTATION**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
**04 / 01 / 2015**

Amount of Each Disbursement this Period: **8414.21**

Transaction ID : **SB17.I2422**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... **9970.92**

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

201507220200228731

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 57
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

**A. H2 CAPITAL CONSULTING**

Full Name (Last, First, Middle Initial)

Mailing Address **325 7TH ST, NW  
STE 400**

City **WASHINGTON** State **DC** Zip Code **20004**

Purpose of Disbursement  
**FUNDRAISING CONSULTING, TRANSPORTATION, SHIPPING, EVENT CATERING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **04 / 29 / 2015**

Amount of Each Disbursement this Period: **5096.37**

Transaction ID : **SB17.I2430**

Category/Type

**B. H2 CAPITAL CONSULTING**

Full Name (Last, First, Middle Initial)

Mailing Address **325 7TH ST, NW  
STE 400**

City **WASHINGTON** State **DC** Zip Code **20004**

Purpose of Disbursement  
**FUNDRAISING CONSULTING, TRANSPORTATION, SHIPPING, EVENT CATERING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **06 / 10 / 2015**

Amount of Each Disbursement this Period: **5430.30**

Transaction ID : **SB17.I2439**

Category/Type

**C. HIGHWOOD CAPITAL, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address **915 E ST NW**

City **WASHINGTON** State **DC** Zip Code **20004-2016**

Purpose of Disbursement  
**FUNDRAISING CONSULTING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **04 / 01 / 2015**

Amount of Each Disbursement this Period: **20000.00**

Transaction ID : **SB17.I2423**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... **30526.67**

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

201507220200228732

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
Thom Tillis Committee

Full Name (Last, First, Middle Initial)  
**A. HIGHWOOD CAPITAL, LLC**

Mailing Address 915 E ST NW

City WASHINGTON State DC Zip Code 20004-2016

Purpose of Disbursement FUNDRAISING CONSULTING, TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 04/29/2015

Amount of Each Disbursement this Period: 1690.51

Transaction ID : SB17.I2431

Category/Type

Full Name (Last, First, Middle Initial)  
**B. HYATT HOTELS**

Mailing Address 71 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 05/07/2015

Amount of Each Disbursement this Period: 218.59

Transaction ID : SB17.I2387

Category/Type

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

Mailing Address 18926 W CATAWBA AVE

City CORNELIUS State NC Zip Code 28031

Purpose of Disbursement STORAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY 04/03/2015

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.I2371

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1984.10

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

201507220200228733



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 57
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial) <b>A. LAKE NORMAN STORAGE</b>		Date of Disbursement
Mailing Address 18926 W CATAWBA AVE		MM / DD / YYYY 05 / 06 / 2015
City CORNELIUS	State NC	Zip Code 28031
Purpose of Disbursement STORAGE	Candidate Name	Amount of Each Disbursement this Period 75.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. LAKE NORMAN STORAGE</b>		Date of Disbursement
Mailing Address 18926 W CATAWBA AVE		MM / DD / YYYY 06 / 04 / 2015
City CORNELIUS	State NC	Zip Code 28031
Purpose of Disbursement STORAGE	Candidate Name	Amount of Each Disbursement this Period 75.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. LODGE FRONT OFFICE</b>		Date of Disbursement
Mailing Address 310 S ENGLAND ST		MM / DD / YYYY 06 / 15 / 2015
City WILLIAMSBURG	State VA	Zip Code 23185
Purpose of Disbursement LODGING	Candidate Name	Amount of Each Disbursement this Period 280.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	430.54
<b>TOTAL</b> This Period (last page this line number only).....	

201507220200228734

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 50 OF 57

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)

**A. MARRIOTT**

Mailing Address 600 UNICORN PARK DRIVE

City WOBURN State MA Zip Code 01801

Purpose of Disbursement  
LODGING

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
06 / 10 / 2015

Amount of Each Disbursement this Period

289.23
--------

Transaction ID : SB17.I2402

**B. MI-CONNECTION**

Mailing Address PO BOX 90

City MOORESVILLE State NC Zip Code 28115

Purpose of Disbursement  
PHONE/INTERNET SERVICES

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
04 / 28 / 2015

Amount of Each Disbursement this Period

291.48
--------

Transaction ID : SB17.I2429

**C. MOTHER EMANUEL HOPE FUND**

Mailing Address C/O CITY OF CHARLESTON  
PO BOX 304

City CHARLESTON State SC Zip Code 29402

Purpose of Disbursement  
DONATION

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
06 / 22 / 2015

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.I2443

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

1580.71

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

201507220200228735

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)

**A. ONMESSAGE, INC.**

Mailing Address 705 MELVIN AVE. #105

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
MEDIA CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYYYY
06	30	2015

Amount of Each Disbursement this Period

30306.89
----------

Transaction ID : SB17.I2445

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES, INC.**

Mailing Address 182 HOWARD ST

City SAN FRANCISCO State CA Zip Code 94105-1811

Purpose of Disbursement  
TRANSPORTATION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYYYY
05	26	2015

Amount of Each Disbursement this Period

34.34
-------

Transaction ID : SB17.I2394

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address PO BOX 66100

City CHICAGO State IL Zip Code 60666

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYYYY
04	27	2015

Amount of Each Disbursement this Period

359.60
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Transaction ID : SB17.I2378

Category/  
Type

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

30700.83
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TOTAL This Period (last page this line number only).....

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201507220200228736

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

Full Name (Last, First, Middle Initial)  
**A. UNITED AIRLINES**

Mailing Address **PO BOX 66100**

City **CHICAGO** State **IL** Zip Code **60666**

Purpose of Disbursement  
**AIRLINE FEE**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**05 / 11 / 2015**

Amount of Each Disbursement this Period  
**7.99**

Transaction ID : **SB17.I2388**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. US SENATE**

Mailing Address **2 CONSTITUTION AVE NE**

City **WASHINGTON** State **DC** Zip Code **20002**

Purpose of Disbursement  
**PAPER SUPPLIES**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**04 / 14 / 2015**

Amount of Each Disbursement this Period  
**190.50**

Transaction ID : **SB17.I2376**

Category/Type

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

Mailing Address **2 CONSTITUTION AVE NE**

City **WASHINGTON** State **DC** Zip Code **20002**

Purpose of Disbursement  
**PAPER SUPPLIES**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**05 / 13 / 2015**

Amount of Each Disbursement this Period  
**75.00**

Transaction ID : **SB17.I2392**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... **273.49**

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

201507220200228737

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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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)  
**Thom Tillis Committee**

**A. VERIZON**

Full Name (Last, First, Middle Initial)  
Mailing Address 140 WEST ST

City NEW YORK State NY Zip Code 10007-2141

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 06 / 2015

Amount of Each Disbursement this Period  
100.47

Transaction ID : SB17.I2374

**B. VERIZON**

Full Name (Last, First, Middle Initial)  
Mailing Address 140 WEST ST

City NEW YORK State NY Zip Code 10007-2141

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

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

Amount of Each Disbursement this Period  
100.52

Transaction ID : SB17.I2383

**C. VERIZON**

Full Name (Last, First, Middle Initial)  
Mailing Address 140 WEST ST

City NEW YORK State NY Zip Code 10007-2141

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 05 / 2015

Amount of Each Disbursement this Period  
100.52

Transaction ID : SB17.I2400

**SUBTOTAL** of Disbursements This Page (optional)..... 301.51

**TOTAL** This Period (last page this line number only)..... 170275.49

201507220200228738

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Cambridge Analytica, LLC**  
 Nature of Debt (Purpose):  
**Micro-Targeting**  
 Mailing Address **The News Corp Building, STE 2703**  
 City State Zip Code  
**New York NY 10036**

Outstanding Balance Beginning This Period  
  
 Amount Incurred This Period  
  
 Payment This Period  
  
 Outstanding Balance at Close of This Period  
  
 Transaction ID : **SD01.00004**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Capitol Communications, Inc.**  
 Nature of Debt (Purpose):  
**Management Consulting**  
 Mailing Address **PO Box 876**  
 City State Zip Code  
**Granite Falls NC 28630**

Outstanding Balance Beginning This Period  
  
 Amount Incurred This Period  
  
 Payment This Period  
  
 Outstanding Balance at Close of This Period  
  
 Transaction ID : **SD01.00003**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**CM&Co, LLC**  
 Nature of Debt (Purpose):  
**Accounting Services**  
 Mailing Address **PO Box 97275**  
 City State Zip Code  
**Raleigh NC 27624**

Outstanding Balance Beginning This Period  
  
 Amount Incurred This Period  
  
 Payment This Period  
  
 Outstanding Balance at Close of This Period  
  
 Transaction ID : **SD01.00060**

1) **SUBTOTALS** This Period This Page (optional) ...   
 2) **TOTALS** This Period (last page this line number only) ...   
 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...   
 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

201507220200228739

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Thom Tillis Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Freedom Partners**

Nature of Debt (Purpose):

Catering

Mailing Address 1515 N. Courthouse Road

City State Zip Code  
Arlington VA 22201

Outstanding Balance Beginning This Period

1527.15

Transaction ID : SD01.00100

Amount Incurred This Period

0.00

Payment This Period

1527.15

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**H2 Capital Consulting, LLC**

Nature of Debt (Purpose):

Site Fee/Food/Beverage

Mailing Address 325 7th Street, NW Suite 400

City State Zip Code  
Washington DC 20004

Outstanding Balance Beginning This Period

8414.21

Transaction ID : SD01.00038

Amount Incurred This Period

15710.34

Payment This Period

18940.88

Outstanding Balance at Close of This Period

5183.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Highwood Capital, LLC**

Nature of Debt (Purpose):

Fundraising Consulting

Mailing Address 915 E St, NW, #613

City State Zip Code  
Washington DC 20004

Outstanding Balance Beginning This Period

31690.51

Transaction ID : SD01.00006

Amount Incurred This Period

21694.70

Payment This Period

21690.51

Outstanding Balance at Close of This Period

31694.70

1) **SUBTOTALS** This Period This Page (optional) ...

36878.37

2) **TOTALS** This Period (last page this line number) ...

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

201507220200228740

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Thom Tillis Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Lucy Croxton Consulting**

Nature of Debt (Purpose):

Fundraising Consulting, Insurance, Lodgi

Mailing Address 1315 East Blvd, Apt 311

City State

Charlotte

Zip Code

NC 28203

Outstanding Balance Beginning This Period

17000.00

Transaction ID : SD01.00039

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Macon Consulting**

Nature of Debt (Purpose):

Fundraising Consulting

Mailing Address PO Box 3962

City State

Greenville

Zip Code

NC 27836

Outstanding Balance Beginning This Period

125000.00

Transaction ID : SD01.00002

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

125000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**OnMessage, Inc.**

Nature of Debt (Purpose):

Advertising, Advertising Production

Mailing Address 705 Melvin Ave. #105

City

Annapolis

State

MD

Zip Code

21401

Outstanding Balance Beginning This Period

83333.24

Transaction ID : SD01.00001

Amount Incurred This Period

11000.00

Payment This Period

30306.89

Outstanding Balance at Close of This Period

64026.35

1) **SUBTOTALS** This Period This Page (optional) ...

206026.35

2) **TOTALS** This Period (last page this line number only) ...

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
**Thom Tillis Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Targeted Victory, LLC</b>	Nature of Debt (Purpose): Online Services, Email Services
Mailing Address 1033 N. Fairfax ST, Suite 40	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD01.00061	
Amount Incurred This Period 1612.01	Payment This Period 0.00	Outstanding Balance at Close of This Period 1612.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional) ...	1612.01
2) TOTALS This Period (last page this line number only) ...	374953.77
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	374953.77

201507220200228742

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FEC MAIL CENTER  
2015 JUL 20 PM 12:29

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AMOUNT  
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Federal Election Commission  
999 E Street, N.W.  
Washington, DC 20463

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7013 1710 0000 0271 2406

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# United States Senate

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Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
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UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

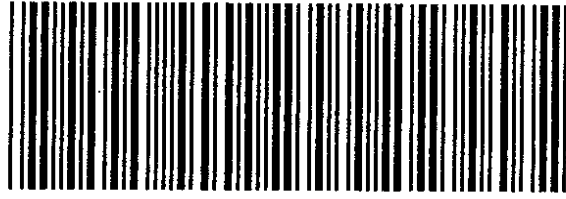
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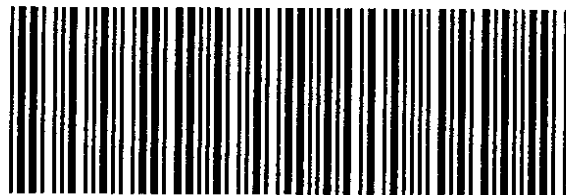
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Date of Receipt  
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Date of Receipt or Postmark

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