

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
MAVERICK PAC USA

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 **BRADLEY CRATE**

Signature of Treasurer BRADLEY CRATE [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

MAVERICK PAC USA

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="28958.35"/>	<input type="text" value="28958.35"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="88303.53"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="57861.00"/>	<input type="text" value="155269.18"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="146164.53"/>	<input type="text" value="184227.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="122255.18"/>	<input type="text" value="160318.18"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23909.35"/>	<input type="text" value="23909.35"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
MAVERICK PAC USA

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	300.00	6975.00
(ii) Unitemized	1000.00	7035.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1300.00	14010.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1300.00	15510.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	56561.00	139759.18
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	57861.00	155269.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	57861.00	155269.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	13202.94	19060.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13202.94	19060.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	109052.24	141257.85
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	122255.18	160318.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	122255.18	160318.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1300.00	15510.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1300.00	15510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13202.94	19060.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13202.94	19060.33

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

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

FOR LINE NUMBER: PAGE 6 OF 62
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
MAVERICK PAC USA

A. WILLIAM TRACHMAN
Full Name (Last, First, Middle Initial)
Mailing Address 8661 E. 26TH AVENUE
City DENVER State CO Zip Code 80238
FEC ID number of contributing federal political committee. C
Name of Employer LITTLER MENDELSON PC Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 10 / 2014
Transaction ID : SA11AI.11559
Amount of Each Receipt this Period
300.00

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) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
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) ▼
Aggregate Year-to-Date ▼

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

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. NICK ABRAHAM
Full Name (Last, First, Middle Initial)

Mailing Address 400 SEWARD SQUARE SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. HOUSE COMMITTEE ON ENERGY AND CLIMATE CHANGE	Occupation LEGISLATIVE STAFF
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		04		2014

Transaction ID : SA17.11665

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. JESSE ADAMS
Full Name (Last, First, Middle Initial)

Mailing Address 906 8TH ST. NE

City WASHINGTON	State DC	Zip Code 20002
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FEC ID number of contributing federal political committee. **C**

Name of Employer RSLC	Occupation DIRECTOR
--------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		10		2014

Transaction ID : SA17.11717

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. MAXIMILLIAN AMSTER
Full Name (Last, First, Middle Initial)

Mailing Address 2101 W WATROUS AVE

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C**

Name of Employer JEB BUSH & ASSOCIATES LLC	Occupation PRINCIPAL
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2014

Transaction ID : SA17.11693

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. BRANDON ASHLEY
Full Name (Last, First, Middle Initial)

Mailing Address 515 8TH STREET NE

City WASHINGTON State DC Zip Code 20002

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

Name of Employer U.S. SENATE Occupation SENIOR POLICY ADVISORY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 05 / 2014
Transaction ID : SA17.11686

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. ANDRES ASION
Full Name (Last, First, Middle Initial)

Mailing Address 1000 S. POINTE DRIVE APT 2204

City MIAMI BEACH State FL Zip Code 33139

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

Name of Employer FORTUNE INTERNATIONAL GROUP Occupation VICE PRESIDENT OF SALES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 18 / 2014
Transaction ID : SA17.11792

Amount of Each Receipt this Period 600.00

NON-CONTRIBUTION ACCOUNT

C. JOHN ATHON
Full Name (Last, First, Middle Initial)

Mailing Address 3701 UNIVERSITY

City HOUSTON State TX Zip Code 77005

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

Name of Employer FREEDOM CNG Occupation ENERGY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2014
Transaction ID : SA17.11691

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. CHRISTINA BAIN
Full Name (Last, First, Middle Initial)
Mailing Address 22 RAYMOND STREET
City MANCHESTER State MA Zip Code 01944
FEC ID number of contributing federal political committee. **C**
Name of Employer BABSON COLLEGE Occupation PROGRAM DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 18 / 2014
Transaction ID : SA17.11602
Amount of Each Receipt this Period 300.00
NON-CONTRIBUTION ACCOUNT

B. BRETT BAKER
Full Name (Last, First, Middle Initial)
Mailing Address 2110 BALDWIN APT. 1117
City HOUSTON State TX Zip Code 77002
FEC ID number of contributing federal political committee. **C**
Name of Employer SWBC Occupation VICE PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 12 / 2014
Transaction ID : SA17.11582
Amount of Each Receipt this Period 300.00
NON-CONTRIBUTION ACCOUNT

C. CASSANDRA BAKER
Full Name (Last, First, Middle Initial)
Mailing Address 60 L STREET NE #417
City WASHINGTON State DC Zip Code 20002
FEC ID number of contributing federal political committee. **C**
Name of Employer FREEDOM PARTNERS Occupation ASSOCIATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 10 / 2014
Transaction ID : SA17.11716
Amount of Each Receipt this Period 300.00
NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. BEVERLY BARRETT
Full Name (Last, First, Middle Initial)

Mailing Address 5353 MEMORIAL DRIVE
NO. 3024

City HOUSTON State TX Zip Code 77007

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

Name of Employer UNIVERSITY OF HOUSTON Occupation LECTURER PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 10 / 2014
Transaction ID : SA17.11571

Amount of Each Receipt this Period
250.00

NON-CONTRIBUTION ACCOUNT

B. MICHAEL BASINSKI
Full Name (Last, First, Middle Initial)

Mailing Address 1861 HOUSEMAN AVE NE

City GRAND RAPIDS State MI Zip Code 49505

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

Name of Employer ICON REALTY GROUP, LLC Occupation REAL ESTATE PROFESSIONAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 03 / 2014
Transaction ID : SA17.11651

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. SLATER BAYLISS
Full Name (Last, First, Middle Initial)

Mailing Address 215 S MONROE ST
SUITE 602

City TALLAHASSEE State FL Zip Code 32301

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

Name of Employer THE ADVOCACY GROUP AT CARDENAS PAF Occupation CONSULTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 14 / 2014
Transaction ID : SA17.11593

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. ASHLEY BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 625 E MONROE AVE #347

City ALEXANDRIA State VA Zip Code 22301

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

Name of Employer STRATEGY AND MANAGEMENT SERVICES (Occupation ARMY PROGRAM ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2014
Transaction ID : SA17.11706

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. KARL BECKSTEIN
Full Name (Last, First, Middle Initial)

Mailing Address 910 15TH ST. NW APT 712

City WASHINGTON State DC Zip Code 20005

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

Name of Employer USGLC Occupation REGIONAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 04 / 2014
Transaction ID : SA17.11660

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. SARAH BELKNAP
Full Name (Last, First, Middle Initial)

Mailing Address 805 N WAYNE ST. #201

City ARLINGTON State VA Zip Code 22201

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

Name of Employer GENERATION OPPORTUNITY Occupation DIGITAL PROJECT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 04 / 2014
Transaction ID : SA17.11666

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. JEFF BERKOWITZ
Full Name (Last, First, Middle Initial)

Mailing Address 1391 PENNSYLVANIA AVE., SE #246

City WASHINGTON State DC Zip Code 20003

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

Name of Employer BERKOWITZ PUBLIC AFFAIRS Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2014
Transaction ID : SA17.11652

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. GANESH BETANABHATLA
Full Name (Last, First, Middle Initial)

Mailing Address 1280 FIFTH AVENUE APT 19E

City NEW YORK State NY Zip Code 10029

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

Name of Employer TALARA CAPITAL MANAGEMENT Occupation PRIVATE EQUITY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2014
Transaction ID : SA17.11575

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. JOSH BLACKMAN
Full Name (Last, First, Middle Initial)

Mailing Address 9100 WESTHEIMER RD APT 226

City HOUSTON State TX Zip Code 77063

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

Name of Employer SOUTH TEXAS COLLEGE OF LAW Occupation LAW PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 13 / 2014
Transaction ID : SA17.11584

Amount of Each Receipt this Period 100.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. LUCAS BOYCE
Full Name (Last, First, Middle Initial)

Mailing Address 4117 FAIRVIEW VISTA POINT #304

City ORLANDO State FL Zip Code 32804

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

Name of Employer ORLANDO MAGIC Occupation COMMUNITY AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2014
Transaction ID : SA17.11636

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. PAUL BOYD
Full Name (Last, First, Middle Initial)

Mailing Address 3085 FAIRBORN DR

City MEMPHIS State TN Zip Code 38115

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

Name of Employer SHELBY COUNTY GOVERNMENT Occupation PROBATE COURT CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 05 / 2014
Transaction ID : SA17.11681

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. FRANCIS BROGAN
Full Name (Last, First, Middle Initial)

Mailing Address 2510 VIRGINIA AVENUE N.W., APT 402-

City DC State DC Zip Code 20037

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

Name of Employer SELF Occupation ATTORNEY AND BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2014
Transaction ID : SA17.11649

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. ERIK BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 44 CASTLETREE

City LAS FLORES State CA Zip Code 92688

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

Name of Employer DMI DIRECT Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA17.11725

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

B. TRAVIS BURK
Full Name (Last, First, Middle Initial)

Mailing Address 901 N. NELSON ST.
#1508

City ARLINGTON State VA Zip Code 22203

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

Name of Employer CRC PUBLIC RELATIONS Occupation SENIOR ACCOUNT EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA17.11672

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

C. JEB BUSH
Full Name (Last, First, Middle Initial)

Mailing Address 1200 ANASTASIA AVENUE

City CORAL GABLES State FL Zip Code 33134

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

Name of Employer JBA Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA17.11727

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. LISSETTE CALDERON
Full Name (Last, First, Middle Initial)

Mailing Address 1611 SOUTH BAYSHORE DRIVE

City COCONUT GROVE	State FL	Zip Code 33133
-----------------------	-------------	-------------------

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

Name of Employer RELATED	Occupation PRESIDENT
-----------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA17.11786

Amount of Each Receipt this Period
500.00

NON-CONTRIBUTION ACCOUNT

B. KENDALL CAREW
Full Name (Last, First, Middle Initial)

Mailing Address 5201 MEMORIAL DRIVE
511

City HOUSTON	State TX	Zip Code 77007
-----------------	-------------	-------------------

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

Name of Employer GALTWAY INDUSTRIES	Occupation PARTNER
--	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA17.11771

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. STEVE CHIAVARONE
Full Name (Last, First, Middle Initial)

Mailing Address 15 LIVINGSTONE DR.

City HAMILTON	State NJ	Zip Code 08619
------------------	-------------	-------------------

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

Name of Employer FEDERATED INVESTORS	Occupation ASSET MANAGEMENT
---	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA17.11585

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. ERIC DOYAL
Full Name (Last, First, Middle Initial)

Mailing Address 1111 POST OAK BLVD.
APT. 2402

City HOUSTON State TX Zip Code 77056-3156

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

Name of Employer ROCK HILL CAPITAL Occupation ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
08 / 08 / 2014
Transaction ID : SA17.11568

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. JUSTIN FAREED
Full Name (Last, First, Middle Initial)

Mailing Address 801 BUENA VISTA

City SANTA BARBARA State CA Zip Code 93108

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

Name of Employer PRO BAND SPORTS INDUSTRIES, INC Occupation VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 05 / 2014
Transaction ID : SA17.11690

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. WILLIAM FIELDS
Full Name (Last, First, Middle Initial)

Mailing Address 1901 CALLOWHILL ST APT 331

City PHILADELPHIA State PA Zip Code 19130

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

Name of Employer JP MORGAN CHASE Occupation FINANCIAL SERVICES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 04 / 2014
Transaction ID : SA17.11680

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. JAMES FITZELLA
Full Name (Last, First, Middle Initial)

Mailing Address 2520 E. MEREDITH DR.

City VIENNA State VA Zip Code 22181

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

Name of Employer DMG GROUP Occupation ASSOCIATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA17.11670

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

B. ROBERT FLOCK
Full Name (Last, First, Middle Initial)

Mailing Address 1221 MASSACHUSETTS AVENUE, NW
APT. 1012

City WASHINGTON State DC Zip Code 20005

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

Name of Employer BROWNSTEIN HYATT FARBER SCHRECK, LLP Occupation POLICY ASSISTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2014

Transaction ID : SA17.11612

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

C. ALAN FLOREZ
Full Name (Last, First, Middle Initial)

Mailing Address 220 S. RIDGEWOOD AVE.

City DAYTONA BEACH State FL Zip Code 32114

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

Name of Employer BROWN & BROWN INSURANCE Occupation VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA17.11734

Amount of Each Receipt this Period
 1500.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)
A. WILL FOWLER

Mailing Address 7 AVON PL

City ARLINGTON State MA Zip Code 02474

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

Name of Employer Occupation
STREAMBINO INC. FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 28 / 2014
Transaction ID : SA17.11630

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
B. FREEDOM PARTNERS ACTION FUND, INC.

Mailing Address 1515 N. COURTHOUSE RD. STE. 620

City ARLINGTON State VA Zip Code 22201

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 25 / 2014
Transaction ID : SA17.11835

Amount of Each Receipt this Period
2500.00

NON-CONTRIBUTION ACCOUNT

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

Mailing Address 2727 REVERE ST.
APT. 3015

City HOUSTON State TX Zip Code 77098

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

Name of Employer Occupation
CARGO CRATING COMPANY VICE-PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 04 / 2014
Transaction ID : SA17.11677

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	3100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. LUIS GAZITUA
Full Name (Last, First, Middle Initial)

Mailing Address 1101 BRICKELL AVENUE
SOUTH TOWER - 8TH FLOOR

City MIAMI State FL Zip Code 33131

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

Name of Employer GAZITUA LETELIER Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 14 / 2014
Transaction ID : SA17.11591

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. CHRISTOPHER GEIGER
Full Name (Last, First, Middle Initial)

Mailing Address 2995 STANFIELD AVE

City ORLANDO State FL Zip Code 32814

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

Name of Employer LOCKHEED MARTIN Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2014
Transaction ID : SA17.11655

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. GLENTON GILZEAN
Full Name (Last, First, Middle Initial)

Mailing Address 337 S. PLANT AVE

City TAMPA State FL Zip Code 33606

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

Name of Employer STEP UP FOR STUDENTS Occupation EDUCATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 08 / 2014
Transaction ID : SA17.11704

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. MARY GOLDSMITH
Full Name (Last, First, Middle Initial)

Mailing Address 811 4TH STREET NW
#914

City WASHINGTON State DC Zip Code 20001

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

Name of Employer MCGLADREY Occupation BUSINESS DEVELOPMENT DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 18 / 2014
Transaction ID : SA17.11603

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. DAN GREEN
Full Name (Last, First, Middle Initial)

Mailing Address 1045 21ST COURT

City VERO BEACH State FL Zip Code 32960

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

Name of Employer THE WASHINGTON INSTITUTE FOR NEAR EAST Occupation RESEARCH FELLOW

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 08 / 2014
Transaction ID : SA17.11697

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. MELANIE GRIFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 4220 WEST CORONA STREET

City TAMPA State FL Zip Code 33629

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

Name of Employer DEAN MEAD Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 09 / 2014
Transaction ID : SA17.11713

Amount of Each Receipt this Period
250.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. MICHAEL GRIFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 4220 WEST CORONA STREET

City TAMPA	State FL	Zip Code 33629
---------------	-------------	-------------------

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

Name of Employer VERTICAL INTEGRATION, INC.	Occupation COMMERCIAL REAL ESTATE
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Transaction ID : SA17.11663

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. MIKE GRIFFIN
Full Name (Last, First, Middle Initial)

Mailing Address 4220 WEST CORONA STREET

City TAMPA	State FL	Zip Code 33626
---------------	-------------	-------------------

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

Name of Employer VERTICAL INTEGRATION	Occupation SENIOR VICE PRESIDENT
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2014

Transaction ID : SA17.11711

Amount of Each Receipt this Period
250.00

NON-CONTRIBUTION ACCOUNT

C. ROBERT GRIGGS
Full Name (Last, First, Middle Initial)

Mailing Address 602 CAMBRIDGE AVE

City FORT WALTON BEACH	State FL	Zip Code 32547
---------------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2014

Transaction ID : SA17.11760

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. RYAN HADDAD
Full Name (Last, First, Middle Initial)

Mailing Address 1018 QUEEN STREET

City ALEXANDRIA State VA Zip Code 22210

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

Name of Employer SELF Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2014
Transaction ID : SA17.11765

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. KRISTY HAWLEY
Full Name (Last, First, Middle Initial)

Mailing Address 1128 25TH STREET NW, APT. 1

City WASHINGTON State DC Zip Code 20037

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

Name of Employer STUDENT Occupation STUDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2014
Transaction ID : SA17.11683

Amount of Each Receipt this Period 250.00

NON-CONTRIBUTION ACCOUNT

C. CHELSI HENRY
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5695

City TALLAHASSEE State FL Zip Code 32314

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

Name of Employer FLORIDA DEPARTMENT OF FINANCIAL SER Occupation SENIOR CABINET AIDE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 19 / 2014
Transaction ID : SA17.11818

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 62
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)
A. TAMMY HILL

Mailing Address P O BOX 13691

City CHESAPEAKE State VA Zip Code 23325

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

Name of Employer HOSPIRA Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA17.11708

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
B. CAITLIN HODGES

Mailing Address 2424 SAWYER HEIGHTS #320

City HOUSTON State TX Zip Code 77007

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

Name of Employer KBR Occupation SR. SPECIALIST, GOVERNMENT RELATION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA17.11722

Amount of Each Receipt this Period
150.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
C. JONATHAN HOFFMAN

Mailing Address 1208 TIDAL BASIN CT.

City CHARLESTON State SC Zip Code 29412

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

Name of Employer SELF Occupation ATTORNEY-ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA17.11774

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. BILL HULSE
Full Name (Last, First, Middle Initial)

Mailing Address 705 E STREET NE, APT. A

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

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

Name of Employer THE CONSUMER BANKERS ASSOCIATION	Occupation GOVERNMENT RELATIONS PROFESSIONAL
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2014

Transaction ID : SA17.11618

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. MATTHEW HUNTER
Full Name (Last, First, Middle Initial)

Mailing Address 1300 MILAN AVE

City SOUTH PASADENA	State CA	Zip Code 91030
------------------------	-------------	-------------------

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

Name of Employer REPUBLICAN NATIONAL COMMITTEE	Occupation DEFENSE ANALYST
---	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2014

Transaction ID : SA17.11685

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. TANVEER KATHAWALLA
Full Name (Last, First, Middle Initial)

Mailing Address 2517 PENNSLYVANIA AVE, NW APT#4

City WASHINGTON, DC	State DC	Zip Code 20037
------------------------	-------------	-------------------

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

Name of Employer IBM	Occupation MANAGEMENT CONSULTANT
-------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2014

Transaction ID : SA17.11609

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. SEAN KIBBY
Full Name (Last, First, Middle Initial)

Mailing Address 620 CONSTITUTION AVE NE

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

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

Name of Employer HERITAGE FOUNDATION	Occupation MANAGER, JOB BANK
---	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		28		2014

Transaction ID : SA17.11627

Amount of Each Receipt this Period
100.00

NON-CONTRIBUTION ACCOUNT

B. JOHNNY KING
Full Name (Last, First, Middle Initial)

Mailing Address 777 DUNLAVY ST. #2101

City HOUSTON	State TX	Zip Code 77019
-----------------	-------------	-------------------

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

Name of Employer BLACKSWAN INVESTMENT PARTNERS	Occupation INVESTMENT ANALYST
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		01		2014

Transaction ID : SA17.11562

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. TEDI KISER
Full Name (Last, First, Middle Initial)

Mailing Address 912 SHOAL CREEK TRAIL

City CHESAPEAKE	State VA	Zip Code 23320
--------------------	-------------	-------------------

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

Name of Employer TEDI KISER	Occupation SERVICE BUSINESS OWNER
--------------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		04		2014

Transaction ID : SA17.11669

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	700.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. TRAVIS KORSON
Full Name (Last, First, Middle Initial)

Mailing Address 1229 30TH STREET, NW

City WASHINGTON State DC Zip Code 20007

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

Name of Employer MILLENNIAL STRATEGY GROUP Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2014
Transaction ID : SA17.11633

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. JEREMY LITTLE
Full Name (Last, First, Middle Initial)

Mailing Address 718 ORONOCO ST. #3

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer CRC PUBLIC RELATIONS Occupation FLACK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 16 / 2014
Transaction ID : SA17.11762

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. JAMES LLOYD
Full Name (Last, First, Middle Initial)

Mailing Address 2414 PELHAM DRIVE

City HOUSTON State TX Zip Code 77019

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

Name of Employer MAYER BROWN LLP Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2014
Transaction ID : SA17.11631

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. GARRETT MARQUIS
Full Name (Last, First, Middle Initial)

Mailing Address 2511 Q ST. NW
APT. 105

City WASHINGTON State DC Zip Code 20007

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

Name of Employer PRISM GROUP Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 04 / 2014
Transaction ID : SA17.11671

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. NERI MARTINEZ
Full Name (Last, First, Middle Initial)

Mailing Address 1500 MASSACHUSETTS AVE NW
APT. 458

City WASHINGTON State DC Zip Code 20005

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

Name of Employer REPUBLICAN STATE LEADERSHIP COMMITTEE Occupation DIRECTOR, FUTURE MAJORITY PROJECT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
09 / 02 / 2014
Transaction ID : SA17.11642

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. DACIA MARXRIESER
Full Name (Last, First, Middle Initial)

Mailing Address 1520 PINE GROVE LANE

City CHESAPEAKE State VA Zip Code 23321

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

Name of Employer MDT,INC. Occupation CONTROLLER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
08 / 25 / 2014
Transaction ID : SA17.11616

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. DAWN MATHESON
Full Name (Last, First, Middle Initial)

Mailing Address 1049 SHOAL CREEK TRAIL

City CHESAPEAKE	State VA	Zip Code 23320
--------------------	-------------	-------------------

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

Name of Employer THE MATHESON GROUP INC.	Occupation EXECUTIVE
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	21	/	2014

Transaction ID : SA17.11611

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. CHRIS MAY
Full Name (Last, First, Middle Initial)

Mailing Address 3812 BENTON ST. NW

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

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

Name of Employer KIMBELL & ASSOCIATES	Occupation DIRECTOR, FINANCE & OPERATIONS
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	28	/	2014

Transaction ID : SA17.11628

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. COLLEEN MCKNIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 1028 W 22ND

City HOUSTON	State TX	Zip Code 77008
-----------------	-------------	-------------------

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

Name of Employer HOGAN LOVELLS US LLP	Occupation ATTORNEY
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	11	/	2014

Transaction ID : SA17.11573

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. RYAN MCKNIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 1028 W 22ND

City HOUSTON	State TX	Zip Code 77008
-----------------	-------------	-------------------

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

Name of Employer PILLSBURY WINTHROP SHAW PITTMAN	Occupation OIL AND GAS ATTORNEY
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	11	/	2014

Transaction ID : SA17.11579

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. Trent McKnight
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 391

City Throckmorton	State TX	Zip Code 76483
----------------------	-------------	-------------------

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

Name of Employer McKnight Ranch	Occupation Part Owner
------------------------------------	--------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09	/	12	/	2014

Transaction ID : SA17.11739

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. CAMERON NAZMINIA
Full Name (Last, First, Middle Initial)

Mailing Address 3310 RANDY RD

City CHEYENNE	State WY	Zip Code 82001
------------------	-------------	-------------------

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

Name of Employer STATE OF WYOMING	Occupation ADMINISTRATION
--------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	17	/	2014

Transaction ID : SA17.11599

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial) A. NUSTAR PAC		Date of Receipt
Mailing Address 19003 1H-10 WEST		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN ANTONIO	TX	78257
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA17.11826
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	NON-CONTRIBUTION ACCOUNT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. HEATHER O'SHEA		Date of Receipt
Mailing Address 1332 21ST STREET APT 301		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20036
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA17.11688
Name of Employer	Occupation	Amount of Each Receipt this Period
KPMG	MANAGEMENT CONSULTING	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	NON-CONTRIBUTION ACCOUNT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ERIC OPIELA		Date of Receipt
Mailing Address 6612 MANZANITA ST		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
AUSTIN	TX	78759
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA17.11581
Name of Employer	Occupation	Amount of Each Receipt this Period
ERIC OPIELA PLLC	ATTORNEY	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	NON-CONTRIBUTION ACCOUNT
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. ORLANDO MAGIC, LTD
Full Name (Last, First, Middle Initial)
Mailing Address 8701 MAITLAND SUMMIT BLVD.
City ORLANDO State FL Zip Code 32810
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 11 / 2014
Transaction ID : SA17.11577
Amount of Each Receipt this Period 2000.00
NON-CONTRIBUTION ACCOUNT

B. MORGAN ORTAGUS
Full Name (Last, First, Middle Initial)
Mailing Address 301 E 66TH ST APT 6G
City NEW YORK State NY Zip Code 10065
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
STANDARD CHARTERED BANK DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 06 / 2014
Transaction ID : SA17.11695
Amount of Each Receipt this Period 300.00
NON-CONTRIBUTION ACCOUNT

C. NILDA PEDROSA
Full Name (Last, First, Middle Initial)
Mailing Address 4901 ALHAMBRA CIRCLE
City CORAL GABLES State FL Zip Code 33146
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
STATE OF FLORIDA DEPUTY ATTORNEY GENERAL
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 17 / 2014
Transaction ID : SA17.11785
Amount of Each Receipt this Period 500.00
NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 2800.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. NOAH PETERS
Full Name (Last, First, Middle Initial)

Mailing Address 9803 PAW PAW WAY

City ROCKVILLE State MD Zip Code 20850

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

Name of Employer BAILEY & EHRENBERG Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 03 / 2014
Transaction ID : SA17.11654

Amount of Each Receipt this Period
 250.00

NON-CONTRIBUTION ACCOUNT

B. BENJMAIN PROLER
Full Name (Last, First, Middle Initial)

Mailing Address 1504 CROCKER

City HOUSTON State TX Zip Code 77019

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

Name of Employer SHELL ENERGY NORTH AMERICA (SHELL OIL) Occupation COMMERCIAL & INDUSTRIAL ANALYST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014
Transaction ID : SA17.11595

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

C. GINNI RAGAN
Full Name (Last, First, Middle Initial)

Mailing Address 300 W. SPRING STREET, UNIT 1602

City COLUMBUS State OH Zip Code 43215

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

Name of Employer SELF Occupation AGING ADVOCATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2014
Transaction ID : SA17.11824

Amount of Each Receipt this Period
 10000.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	10550.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. STEPHEN RODRIGUEZ
Full Name (Last, First, Middle Initial)

Mailing Address 250 MULBERRY ST. #4

City NEW YORK State NY Zip Code 10012

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

Name of Employer COLDON STRATEGIC ADVISORS Occupation CONSULTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 15 / 2014
Transaction ID : SA17.11757

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. PRICE ROE
Full Name (Last, First, Middle Initial)

Mailing Address 5804 CLEVES LN.

City BETHESDA State MD Zip Code 20816

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

Name of Employer DIGITAL MANAGEMENT INC. Occupation VP OF STRATEGIC CONSULTING

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 17 / 2014
Transaction ID : SA17.11775

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. KATHLEEN ROONEY
Full Name (Last, First, Middle Initial)

Mailing Address 3241 N ST NW APT 2

City WASHINGTON State DC Zip Code 20007

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

Name of Employer ROONEY HOLDINGS Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 27 / 2014
Transaction ID : SA17.11626

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 62
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. KATHLEEN RUDIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 1860 CALIFORNIA ST NW, APT 202
 City WASHINGTON State DC Zip Code 20009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DELOITTE Occupation TAX & LEGAL SENIOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **09 / 18 / 2014**
Transaction ID : SA17.11798
 Amount of Each Receipt this Period **300.00**
 NON-CONTRIBUTION ACCOUNT

B. JOSHUA SANDERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4010 MANDELL ST UNIT 1
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HALL ATTORNEYS Occupation POLICY DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **07 / 22 / 2014**
Transaction ID : SA17.11566
 Amount of Each Receipt this Period **1500.00**
 NON-CONTRIBUTION ACCOUNT

C. JOSHUA SANDERS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4010 MANDELL ST UNIT 1
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer HALL ATTORNEYS Occupation POLICY DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1800.00**

Date of Receipt **08 / 08 / 2014**
Transaction ID : SA17.11569
 Amount of Each Receipt this Period **300.00**
 NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	2100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. ALEX SCHRIVER
Full Name (Last, First, Middle Initial)

Mailing Address 1210 QUEEN STREET #5

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer US HOUSE OF REPRESENTATIVES Occupation CHIEF OF STAFF

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 29 / 2014
Transaction ID : SA17.11635

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

B. MICHAEL SEVI
Full Name (Last, First, Middle Initial)

Mailing Address 685 GRAMATAN AVE APT. 2

City FLEETWOOD State NY Zip Code 10552

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

Name of Employer MARSH & MCLENNAN Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2014
Transaction ID : SA17.11638

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

C. TAREK SHAHLA
Full Name (Last, First, Middle Initial)

Mailing Address 3310 LOUISIANA STREET APT 2326

City HOUSTON State TX Zip Code 77006

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

Name of Employer SHAHLA PC Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2014
Transaction ID : SA17.11640

Amount of Each Receipt this Period 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)
A. BRENDAN SHIELDS

Mailing Address 1904A VERMONT AVE. NW

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

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

Name of Employer US CONGRESS	Occupation MANAGER
---------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	13	/	2014

Transaction ID : SA17.11587

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
B. STUART SICILIANO

Mailing Address 2500 Q STREET NW, APT. #322

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

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

Name of Employer HAMILTON PLACE STRATEGIES	Occupation PUBLIC AFFAIRS
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09	/	03	/	2014

Transaction ID : SA17.11658

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
C. ALEX SIEGEL

Mailing Address 3210 WISCONSIN AVE. NW
APT. 602

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

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

Name of Employer RJC	Occupation DIRECTOR
-------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08	/	26	/	2014

Transaction ID : SA17.11622

Amount of Each Receipt this Period
500.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	1100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. Keith Sonderling
Full Name (Last, First, Middle Initial)

Mailing Address 15631 Glencrest Ave.

City Delray Beach State FL Zip Code 33446

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

Name of Employer Gunster Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA17.11709

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

B. SQUIRE PATTON BOGGS
Full Name (Last, First, Middle Initial)

Mailing Address 2550 M STREET, NW

City WASHINGTON State DC Zip Code 20037

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA17.11837

Amount of Each Receipt this Period
 2500.00

NON-CONTRIBUTION ACCOUNT

C. ADAM STRYKER
Full Name (Last, First, Middle Initial)

Mailing Address 208 CANYON DRIVE

City LAS VEGAS State NV Zip Code 89107

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

Name of Employer AMERICANS FOR PROSPERITY Occupation CHIEF TECHNOLOGY OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA17.11750

Amount of Each Receipt this Period
 250.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	3050.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 OF 62
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)
A. SCOTT STURGILL

Mailing Address 898 WATERWAY PLACE

City State Zip Code
LONGWOOD FL 32750

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DURABLE SAFETY PRODUCTS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.11647

Amount of Each Receipt this Period

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
B. NICOLE VALLS

Mailing Address 3663 SW 8TH ST.
PENTHOUSE

City State Zip Code
MIAMI FL 33135

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VALLS GROUP RESTAURANTEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.11596

Amount of Each Receipt this Period

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
C. NICOLE VALLS

Mailing Address 3663 SW 8TH ST.
PENTHOUSE

City State Zip Code
MIAMI FL 33135

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VALLS GROUP RESTAURANTEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.11678

Amount of Each Receipt this Period

NON-CONTRIBUTION ACCOUNT

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. TIM VANDERPLOE
Full Name (Last, First, Middle Initial)

Mailing Address 3505 REEDS CROSSING DR. SE

City GRAND RAPIDS	State MI	Zip Code 49546
----------------------	-------------	-------------------

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

Name of Employer HANDSTAND INNOVATIONS	Occupation SHOPPER MARKETING COORDINATOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2014

Transaction ID : SA17.11748

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. NATHAN VANDERPLOEG
Full Name (Last, First, Middle Initial)

Mailing Address 950 25TH ST. NW APT. 113N
APT- 113 NORTH

City WASINGTON	State DC	Zip Code 20037
-------------------	-------------	-------------------

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

Name of Employer HANDSTAND INNOVATIONS LLC	Occupation BUSINESS OWNER
---	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2014

Transaction ID : SA17.11763

Amount of Each Receipt this Period
200.00

NON-CONTRIBUTION ACCOUNT

C. NICK VANDER POEL
Full Name (Last, First, Middle Initial)

Mailing Address 5520 RUE ST TROPEZ

City RENO	State NV	Zip Code 89511
--------------	-------------	-------------------

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

Name of Employer AMERICANS FOR PROSPERITY	Occupation NATIONAL GRASSROOTS DIRECTOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2014

Transaction ID : SA17.11752

Amount of Each Receipt this Period
350.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	850.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. YURI VANETIK
Full Name (Last, First, Middle Initial)

Mailing Address 44 CASTLETREE

City LAS FLORES	State CA	Zip Code 92688
--------------------	-------------	-------------------

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

Name of Employer SELF	Occupation PRIVATE EQUITY
--------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2014

Transaction ID : SA17.11736

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

B. MARC WACHTENHEIM
Full Name (Last, First, Middle Initial)

Mailing Address 1400 IRVING STREET, NW

City WASHINGTON	State DC	Zip Code 20010
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	11	/	2014

Transaction ID : SA17.11729

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

C. Miriam Warren
Full Name (Last, First, Middle Initial)

Mailing Address 1619 R St. NW #405

City Washington	State DC	Zip Code 20009
--------------------	-------------	-------------------

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

Name of Employer DCI	Occupation Analyst
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2014

Transaction ID : SA17.11667

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 62
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. FRANK WHITE
Full Name (Last, First, Middle Initial)

Mailing Address 2800 BANQUOS TRL

City PENSACOLA State FL Zip Code 32503

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

Name of Employer SANDY SANSING DEALERSHIPS Occupation GENERAL COUNSEL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2014

Transaction ID : SA17.11607

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

B. BILL WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 2500 MERCHANTS ROW BLVD.
APT. 31

City TALLAHASSEE State FL Zip Code 32311

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

Name of Employer STATE OF FLORIDA Occupation LEGISLATIVE AFFAIRS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA17.11789

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

C. ALEXANDER YERGIN
Full Name (Last, First, Middle Initial)

Mailing Address 5 COWPERTHWAITTE STREET
APARTMENT 221

City CAMBRIDGE State MA Zip Code 02138

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

Name of Employer STUDENT Occupation HARVARD UNIVERSITY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2014

Transaction ID : SA17.11589

Amount of Each Receipt this Period
 300.00

NON-CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	900.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 62
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)
A. ANAT ZEIDMAN

Mailing Address 99 N POST OAK LANE
APT 7102

City HOUSTON State TX Zip Code 77024

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

Name of Employer TEXAS CHILDREN'S HOSPITAL Occupation PROJECT MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 15 / 2014
Transaction ID : SA17.11754

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

Full Name (Last, First, Middle Initial)
B. JAY ZEIDMAN

Mailing Address 99 N POST OAK LANE
#7102

City HOUSTON State TX Zip Code 77024

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

Name of Employer POLMONARYRX Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 761.76

Date of Receipt
09 / 02 / 2014
Transaction ID : SA17.11645

Amount of Each Receipt this Period
300.00

NON-CONTRIBUTION ACCOUNT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	51150.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address PO BOX 1270		Transaction ID : SB21B.11440
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 0.87
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address PO BOX 1270		Transaction ID : SB21B.11441
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 0.87
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address PO BOX 1270		Transaction ID : SB21B.11442
City NEWARK	State NJ	
Zip Code 07101	Purpose of Disbursement MERCHANT FEES	Amount of Each Disbursement this Period 7.95
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional)..... ▶	9.69
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SB21B.11443

Amount of Each Disbursement this Period

25.20

Full Name (Last, First, Middle Initial)

B. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : SB21B.11444

Amount of Each Disbursement this Period

40.81

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : SB21B.11445

Amount of Each Disbursement this Period

25.20

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

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

91.21

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Transaction ID : SB21B.11446

Amount of Each Disbursement this Period

41.69

Full Name (Last, First, Middle Initial)

B. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB21B.11447

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 03 / 2014

Transaction ID : SB21B.11448

Amount of Each Disbursement this Period

66.90

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

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

133.59

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. CAPITAL HILTON

Mailing Address 1001 16TH STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
FACILITY RENTAL & CATERING SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 26 / 2014

Transaction ID : SB21B.11454

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. MISSION

Mailing Address 1606 20TH STREET NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
FACILITY RENTAL & CATERING SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2014

Transaction ID : SB21B.11456

Amount of Each Disbursement this Period

1360.06

Full Name (Last, First, Middle Initial)

C. UNION LEAGUE CLUB (NY)

Mailing Address 38 E 37TH ST

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement
FACILITY RENTAL & CATERING SERVICES

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2014

Transaction ID : SB21B.11458

Amount of Each Disbursement this Period

1544.21

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

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

12904.27

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. UPS STORE

Mailing Address 945 MCKINNEY ST.

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
MEMO: DELIVERY

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2014

Transaction ID : SB21B.11452

Amount of Each Disbursement this Period

56.23

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.00

13138.76

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB29.11459

Amount of Each Disbursement this Period

7	.	9	5
---	---	---	---

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB29.11460

Amount of Each Disbursement this Period

8	.	8	2
---	---	---	---

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	4

Transaction ID : SB29.11461

Amount of Each Disbursement this Period

7	.	9	5
---	---	---	---

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

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

2	4	.	7	2
---	---	---	---	---

7	.	9	5
---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11462

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11463

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11464

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 25 / 2014

Transaction ID : SB29.11465

Amount of Each Disbursement this Period

8.82

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : SB29.11466

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : SB29.11467

Amount of Each Disbursement this Period

8.82

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

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

25.59

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : SB29.11468

Amount of Each Disbursement this Period

8.82

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SB29.11469

Amount of Each Disbursement this Period

8.82

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2014

Transaction ID : SB29.11470

Amount of Each Disbursement this Period

8.82

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

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

26.46

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : SB29.11471

Amount of Each Disbursement this Period

26.46

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 08 / 2014

Transaction ID : SB29.11472

Amount of Each Disbursement this Period

29.50

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2014

Transaction ID : SB29.11473

Amount of Each Disbursement this Period

32.24

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

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

88.20

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11474

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11475

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.11476

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 18 / 2014

Transaction ID : SB29.11477

Amount of Each Disbursement this Period

8.97

B. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SB29.11478

Amount of Each Disbursement this Period

1.75

C. AMERICAN EXPRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SB29.11479

Amount of Each Disbursement this Period

17.64

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

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

28.36

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : SB29.11480

Amount of Each Disbursement this Period

20.53

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2014

Transaction ID : SB29.11481

Amount of Each Disbursement this Period

1.60

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City SAN FRANCISCO State CA Zip Code 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : SB29.11488

Amount of Each Disbursement this Period

25.70

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

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

47.83

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 03 / 2014

Transaction ID : **SB29.11489**

Amount of Each Disbursement this Period

56.44

Full Name (Last, First, Middle Initial)

B. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SB29.11490**

Amount of Each Disbursement this Period

25.15

Full Name (Last, First, Middle Initial)

C. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 04 / 2014

Transaction ID : **SB29.11491**

Amount of Each Disbursement this Period

61.19

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

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

142.78

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SB29.11492

Amount of Each Disbursement this Period

25.95

B. AUTHORIZE.NET

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 8999

City State Zip Code
SAN FRANCISCO CA 94128

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MERCHANT FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SB29.11493

Amount of Each Disbursement this Period

265.40

C. BLACKFINN

Full Name (Last, First, Middle Initial)

Mailing Address 1910 BAGBY ST

City State Zip Code
HOUSTON TX 77002

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MEMO: FACILITY RENTAL &
CATERING SERVICES (ZEIDMAN)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : SB29.11501

Amount of Each Disbursement this Period

724.93

[MEMO ITEM]

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

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

291.35

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. CAPITAL HILTON

Mailing Address 1001 16TH STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: FACILITY RENTAL & CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 12 / 2014

Transaction ID : SB29.11494

Amount of Each Disbursement this Period

43568.00

Full Name (Last, First, Middle Initial)

B. CAPITAL HILTON

Mailing Address 1001 16TH STREET NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: FACILITY RENTAL & CATERING SERVICES

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 26 / 2014

Transaction ID : SB29.11495

Amount of Each Disbursement this Period

33519.11

Full Name (Last, First, Middle Initial)

C. CLARK HILL PLC

Mailing Address 601 PENNSYLVANIA AVE NW, NORTH BUI SUITE 1000

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SB29.11496

Amount of Each Disbursement this Period

2000.00

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

79087.11

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. CLARK HILL PLC

Mailing Address 601 PENNSYLVANIA AVE NW, NORTH BUI
SUITE 1000

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 22 / 2014

Transaction ID : SB29.11497

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ANGEL GARCIA

Mailing Address 332 S MICHIGAN AVENUE
Suite 1032 -G645

City CHICAGO State IL Zip Code 60604

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: REIMBURSEMENT: SEE MEMO
BELOW

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SB29.11483

Amount of Each Disbursement this Period

664.44

Full Name (Last, First, Middle Initial)

C. HARRIS MEDIA, LLC

Mailing Address 611 S. CONGRESS AVENUE, SUITE 400

City AUSTIN State TX Zip Code 78704

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: WEBSITE DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 18 / 2014

Transaction ID : SB29.11498

Amount of Each Disbursement this Period

1975.87

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

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

3640.31

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. ITALIAN STEAKHOUSE

Mailing Address 33 W. KINZIE STREET

City State Zip Code
CHICAGO IL 60654

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: MEMO: FACILITY RENTAL &
CATERING SERVICES (GARCIA)
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : SB29.11485

Amount of Each Disbursement this Period

664.44

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET

City State Zip Code
BEVERLY MA 01915

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: COMPLIANCE CONSULTING
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2014

Transaction ID : SB29.11502

Amount of Each Disbursement this Period

3001.65

Full Name (Last, First, Middle Initial)

C. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET

City State Zip Code
BEVERLY MA 01915

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: COMPLIANCE CONSULTING
Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : SB29.11503

Amount of Each Disbursement this Period

9023.71

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

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

12025.36

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

Full Name (Last, First, Middle Initial)

A. RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.11504**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. ROCK CREEK ADVISORS

Mailing Address 5331 16TH ST NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.11505**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. ROCK CREEK ADVISORS

Mailing Address 5331 16TH ST NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
NON-CONTRIBUTION ACCOUNT: FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.11506**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MAVERICK PAC USA

A. JAY ZEIDMAN

Full Name (Last, First, Middle Initial)

Mailing Address 99 N POST OAK LANE #7102

City HOUSTON State TX Zip Code 77024

Purpose of Disbursement NON-CONTRIBUTION ACCOUNT: REIMBURSEMENT: SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 28 / 2014

Transaction ID : SB29.11499

Amount of Each Disbursement this Period: 724.93

Category/Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... ▶ 724.93

TOTAL This Period (last page this line number only)..... ▶ 108902.24