

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
COUNTRY FIRST POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 228 S WASHINGTON STREET SUITE 115
Check if different than previously reported. (ACC) ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00457705 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2016 through 06 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Salvatore Purpura

Signature of Treasurer Salvatore Purpura [Electronically Filed] Date 07 / 14 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="62035.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="87075.23"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="103000.00"/>	<input type="text" value="200782.77"/>
(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="190075.23"/>	<input type="text" value="262817.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="88282.52"/>	<input type="text" value="161025.26"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="101792.71"/>	<input type="text" value="101792.71"/>
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

COUNTRY FIRST POLITICAL ACTION COMMITTEE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	36500.00	84700.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	36500.00	84700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	66500.00	82500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	103000.00	167200.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	32934.92
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	647.85
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	103000.00	200782.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	103000.00	200782.77

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	53282.52	107925.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	53282.52	107925.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500.00	50000.00
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	600.00
(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	600.00
29. Other Disbursements	2500.00	2500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	88282.52	161025.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	88282.52	161025.26

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)	103000.00	167200.00
34. Total Contribution Refunds (from Line 28(d))	0.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	103000.00	166600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	53282.52	107925.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	647.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	53282.52	107277.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. STEPHEN M. DUPREY
 Full Name (Last, First, Middle Initial)
 Mailing Address 31 WEST PARISH ROAD
 City CONCORD State NH Zip Code 03303-4133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify)

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11A.3108118
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. MR. TOM C. KOROLOGOS
 Full Name (Last, First, Middle Initial)
 Mailing Address 3303 WATER ST NW #6F
 City WASHINGTON State DC Zip Code 20007-3578
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TCK INTERNATIONAL Occupation CONSULTANT
 Receipt For: Primary General Other (specify)

Date of Receipt 06 / 29 / 2016
Transaction ID : SA11A.3106062
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. MAHLIN MALIHI
 Full Name (Last, First, Middle Initial)
 Mailing Address 9220 MIKE GARCIA DR
 City MANASSAS State VA Zip Code 20109-5458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RAM HAULING Occupation CEO
 Receipt For: Primary General Other (specify)

Date of Receipt 05 / 02 / 2016
Transaction ID : SA11A.3103171
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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 7 OF 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. PARHAM MALIHI

Mailing Address 9220 MIKE GARCIA DR

City MANASSAS	State VA	Zip Code 20109-5458
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FEC ID number of contributing federal political committee. **C**

Name of Employer RAM HAULING	Occupation PRESIDENT
---------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2016
Transaction ID : SA11A.3103172

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MRS. ASHLEY B. PALMER

Mailing Address 1112 MONTANA AVENUE

City SANTA MONICA	State CA	Zip Code 90403-1652
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11A.3103119

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DAN S. PALMER JR.

Mailing Address 1112 MONTANA AVENUE

City SANTA MONICA	State CA	Zip Code 90403-1652
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE DEVELOPER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11A.3103120

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 30
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. MR. JAMES L. PITTS
Full Name (Last, First, Middle Initial)

Mailing Address 901 7TH STREET NW SUITE 200

City	State	Zip Code
WASHINGTON	DC	20001-3883

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

Name of Employer	Occupation
NAVIGATORS GLOBAL	PRINCIPAL

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2016

Transaction ID : SA11A.3104443

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. MS. ANN ELISE SAUER
Full Name (Last, First, Middle Initial)

Mailing Address 6060 RIVER DRIVE

City	State	Zip Code
MASON NECK	VA	22079-4126

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

Name of Employer	Occupation
ISM STRATEGIES, LLC	CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2016

Transaction ID : SA11A.3106029

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address 721 SAN LUIS RD.

City	State	Zip Code
BERKELEY	CA	94707-2029

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

Name of Employer	Occupation
CISCO SYSTEMS	ENGINEER

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
 05 / 20 / 2016

Transaction ID : SA11A.3104291

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. JERI SHAPIRO

Mailing Address 14225 VENTURA BOULEVARD #100

City SHERMAN OAKS	State CA	Zip Code 91423-2758
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FEC ID number of contributing federal political committee. **C**

Name of Employer WOODBIDGE INVESTMENTS	Occupation PRINCIPAL
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2016
Transaction ID : SA11A.3103085

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address 14225 VENTURA BLVD #100

City SHERMAN OAKS	State CA	Zip Code 91423-2758
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FEC ID number of contributing federal political committee. **C**

Name of Employer WOODBIDGE	Occupation EXECUTIVE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11A.3102881

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

Name of Employer	Occupation
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	36500.00

**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 10 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. AT&T INC. FEDERAL PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 208 S. AKARD ST., STE. 2701
 City DALLAS State TX Zip Code 75202-4206
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : SA11C.3103249
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

B. BAE SYSTEMS USA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1101 WILSON BLVD.
 City ARLINGTON State VA Zip Code 22209-2211
 FEC ID number of contributing federal political committee. **C** C00281212
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11C.3103117
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

C. BNSF RAILPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 961039
 City FORT WORTH State TX Zip Code 76161-0039
 FEC ID number of contributing federal political committee. **C** C00235739
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : SA11C.3105936
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. FEDERAL EXPRESS PAC		Date of Receipt
Mailing Address 942 SHADY GROVE RD S., FL-1		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City	State	Zip Code
MEMPHIS	TN	38120-4117
FEC ID number of contributing federal political committee.	<input type="text" value="C00068692"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	
		<input type="checkbox"/> Memo Item CONTRIBUTION
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. GENERAL DYNAMICS CORPORATION PAC		Date of Receipt
Mailing Address 2941 FAIRVIEW PARK DRIVE SUITE 100		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2016"/>
City	State	Zip Code
FALLS CHURCH	VA	22042-4541
FEC ID number of contributing federal political committee.	<input type="text" value="C00078451"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	
		<input type="checkbox"/> Memo Item CONTRIBUTION
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. GENERAL ELECTRIC COMPANY PAC		Date of Receipt
Mailing Address 1299 PENNSYLVANIA AVE. NW, STE. 90		<input type="text" value="05"/> / <input type="text" value="06"/> / <input type="text" value="2016"/>
City	State	Zip Code
WASHINGTON	DC	20004-2414
FEC ID number of contributing federal political committee.	<input type="text" value="C00024869"/>	
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	
		<input type="checkbox"/> Memo Item CONTRIBUTION
		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="12500.00"/>
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 12 OF 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

A. HONEYWELL INTERNATIONAL PAC
Full Name (Last, First, Middle Initial)
Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 500 WEST
City WASHINGTON State DC Zip Code 20001-2133
FEC ID number of contributing federal political committee. **C** C00096156
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 13 / 2016**
Transaction ID : SA11C.3103059
Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

B. LOCKHEED MARTIN EMPLOYEES' PAC
Full Name (Last, First, Middle Initial)
Mailing Address 2121 CRYSTAL DR. STE. 100
City ARLINGTON State VA Zip Code 22202-3706
FEC ID number of contributing federal political committee. **C** C00303024
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 17 / 2016**
Transaction ID : SA11C.3104000
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. MACANDREWS & FORBES HOLDINGS INC. PAC
Full Name (Last, First, Middle Initial)
Mailing Address 35 E. 62ND STREET
City NEW YORK State NY Zip Code 10065-8014
FEC ID number of contributing federal political committee. **C** C00432856
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 06 / 2016**
Transaction ID : SA11C.3103251
Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. NATIONAL BEER WHOLESALERS ASSOCIATION PAC

Mailing Address 1101 KING ST., STE. 600

City ALEXANDRIA	State VA	Zip Code 22314-2944
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2016

Transaction ID : SA11C.3105934

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ORBITAL ATK, INC. PAC

Mailing Address 1300 WILSON BLVD, STE. 400

City ARLINGTON	State VA	Zip Code 22209-2307
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250209

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2016

Transaction ID : SA11C.3104292

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

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

Mailing Address 1100 WILSON BOULEVARD, SUITE 1500

City ARLINGTON	State VA	Zip Code 22209-3900
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097568

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2016

Transaction ID : SA11C.3103896

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	14000.00
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 30
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. SIERRA NEVADA PAC		Date of Receipt
Mailing Address P.O. BOX 50193		<input type="text" value="05"/> / <input type="text" value="13"/> / <input type="text" value="2016"/>
City	State	Zip Code
SPARKS	NV	89435-0193
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.3103922
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Aggregate Year-to-Date ▼		CONTRIBUTION
<input type="text" value="2500.00"/>		

Full Name (Last, First, Middle Initial) B. UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT		Date of Receipt
Mailing Address 700 13TH STREET NW SUITE 350		<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City	State	Zip Code
WASHINGTON	DC	20005-3960
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.3103062
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Aggregate Year-to-Date ▼		CONTRIBUTION
<input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) C. USAA EMPLOYEE PAC		Date of Receipt
Mailing Address 9800 FREDERICKSBURG RD		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City	State	Zip Code
SAN ANTONIO	TX	78288-0001
FEC ID number of contributing federal political committee.		Transaction ID : SA11C.3106156
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="5000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Aggregate Year-to-Date ▼		CONTRIBUTION
<input type="text" value="5000.00"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="12500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="66500.00"/>

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. ROB MCCUTCHEON		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 26420 N 41ST LANE		Transaction ID : SB21B.29
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 2830.08
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. ARIZONA REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 3104 E CAMELBACK RD, #1148		Transaction ID : SB21B.102
City PHOENIX	State AZ	
Purpose of Disbursement REGISTRATION FEE	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) C. DOUBLETREE CLEVELAND		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 1111 LAKESIDE AVE		Transaction ID : SB21B.101
City CLEVELAND	State OH	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 1321.11
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).....▶	2830.08
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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2016

Transaction ID : **SB21B.103**

Amount of Each Disbursement this Period

508.97

Memo Item

Full Name (Last, First, Middle Initial)

B. SALVATORE PURPURA

Mailing Address 2475 BRICKELL AVE, APT 2009

City MIAMI State FL Zip Code 33129

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : **SB21B.6**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MARSHALL SALTER

Mailing Address 308 W MYRTLE ST

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2016

Transaction ID : **SB21B.4**

Amount of Each Disbursement this Period

24000.00

Memo Item

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

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

27000.00

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. BRADLEY PATRICK GROUP LLC

Mailing Address 1020 N FAIRFAX ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.17

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BRADLEY PATRICK GROUP LLC

Mailing Address 1020 N FAIRFAX ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FINANCE CONSULTING/TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.20

Amount of Each Disbursement this Period

3413.84

Memo Item

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.23

Amount of Each Disbursement this Period

350.00

Memo Item

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

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

6763.84

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : **SB21B.24**

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : **SB21B.25**

Amount of Each Disbursement this Period

350.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPLIN & DRYSDALE

Mailing Address ONE THOMAS CIR NW STE 1100

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : **SB21B.21**

Amount of Each Disbursement this Period

102.00

Memo Item

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

802.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2016

Transaction ID : SB21B.1

Amount of Each Disbursement this Period

58.89

Memo Item

Full Name (Last, First, Middle Initial)

B. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB21B.2

Amount of Each Disbursement this Period

37.34

Memo Item

Full Name (Last, First, Middle Initial)

C. CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : SB21B.3

Amount of Each Disbursement this Period

13.72

Memo Item

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

109.95

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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : SB21B.14

Amount of Each Disbursement this Period

1251.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Transaction ID : SB21B.15

Amount of Each Disbursement this Period

1251.50

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : SB21B.16

Amount of Each Disbursement this Period

1613.50

Memo Item

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

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

4116.00

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. EDONATION

Mailing Address 117 NORTH ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : SB21B.10

Amount of Each Disbursement this Period

775.70

Memo Item

Full Name (Last, First, Middle Initial)

B. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : SB21B.11

Amount of Each Disbursement this Period

849.74

Memo Item

Full Name (Last, First, Middle Initial)

C. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Transaction ID : SB21B.12

Amount of Each Disbursement this Period

778.22

Memo Item

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

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

2403.66

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELAVON

Mailing Address 1 CONCOURSE PKWY

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

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
06	/	02	/	2016

Transaction ID : SB21B.13

Amount of Each Disbursement this Period

790.04

Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST BANKCARD

Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
CREDIT CARD PAYMENT

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
04	/	28	/	2016

Transaction ID : SB21B.26

Amount of Each Disbursement this Period

1642.50

Memo Item

Full Name (Last, First, Middle Initial)

C. NOPA KITCHEN & BAR

Mailing Address 800 F ST NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
FACILITY RENTAL/CATERING

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
04	/	28	/	2016

Transaction ID : SB21B.108

Amount of Each Disbursement this Period

1642.50

Memo Item

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

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

2432.54

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**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FIRST BANKCARD

Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.27

Amount of Each Disbursement this Period

1614.27

Memo Item

Full Name (Last, First, Middle Initial)

B. CRESCENT HOTEL

Mailing Address 400 CRESCENT CT

City DALLAS State TX Zip Code 75201

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.112

Amount of Each Disbursement this Period

764.33

Memo Item

Full Name (Last, First, Middle Initial)

C. MACNAIR TRAVEL AGENCY

Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.111

Amount of Each Disbursement this Period

140.00

Memo Item

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

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

1614.27

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36611

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.110

Amount of Each Disbursement this Period

709.94

Memo Item

Full Name (Last, First, Middle Initial)

B. HUCKABY DAVIS LISKER

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

Transaction ID : SB21B.5

Amount of Each Disbursement this Period

622.18

Memo Item

Full Name (Last, First, Middle Initial)

C. LOVAS CO LLC

Mailing Address 6740 W DEER VALLEY RD

City GLENDALE State AZ Zip Code 85310

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.18

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

1122.18

**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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. QUARLES & BRADY LLP

Mailing Address 300 N LASALLE ST STE 4000

City CHICAGO State IL Zip Code 60654

Purpose of Disbursement
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
05 / 11 / 2016

Transaction ID : SB21B.22

Amount of Each Disbursement this Period

1045.00

Memo Item

Full Name (Last, First, Middle Initial)

B. VANDENBERG & ASSOCIATES

Mailing Address 3927 ELM AVE

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement
FINANCE 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
04 / 30 / 2016

Transaction ID : SB21B.19

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. YUMA SOLUTIONS INC

Mailing Address 601 S FREMONT AVE

City TAMPA State FL Zip Code 33606

Purpose of Disbursement
COMPUTER SUPPORT

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
04 / 12 / 2016

Transaction ID : SB21B.7

Amount of Each Disbursement this Period

383.00

Memo Item

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

3428.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. YUMA SOLUTIONS INC

Mailing Address 601 S FREMONT AVE

City TAMPA State FL Zip Code 33606

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : SB21B.8

Amount of Each Disbursement this Period

330.00

Memo Item

Full Name (Last, First, Middle Initial)

B. YUMA SOLUTIONS INC

Mailing Address 601 S FREMONT AVE

City TAMPA State FL Zip Code 33606

Purpose of Disbursement
COMPUTER SUPPORT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : SB21B.9

Amount of Each Disbursement this Period

330.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

660.00

53282.52

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHARLES BOUSTANY JR MD FOR SENATE INC

Mailing Address PO BOX 80126

City LAFAYETTE State LA Zip Code 70598

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
CHARLES BOUSTANY JR

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

Date of Disbursement

/ /

Transaction ID : SB23.6

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. FAMILIES FOR JAMES LANKFORD

Mailing Address PO BOX 1639

City BETHANY State OK Zip Code 77008

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
JAMES LANKFORD

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

Date of Disbursement

/ /

Transaction ID : SB23.1

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JOE HECK

Mailing Address PO BOX 753908

City LAS VEGAS State NV Zip Code 89136

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
JOE HECK

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

Date of Disbursement

/ /

Transaction ID : SB23.2

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ROY BLUNT

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
ROY BLUNT

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: MO District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2016

Transaction ID : SB23.3

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MARCO RUBIO SENATE 2016

Mailing Address 228 S WASHINGTON ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
MARCO RUBIO

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 22 / 2016

Transaction ID : SB23.4

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MIKE CRAPO FOR US SENATE

Mailing Address PO BOX 1948

City BOISE State ID Zip Code 83701

Purpose of Disbursement
COMMITTEE CONTRIBUTION

Candidate Name
MIKE CRAPO

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: ID District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2016

Transaction ID : SB23.5

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ARIZONA REPUBLICAN PARTY

Mailing Address 3104 E CAMELBACK RD, #1148

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement
PARTY CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SB23.7

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

5000.00

32500.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
COUNTRY FIRST POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CENTER FOR ARIZONA POLICY

Mailing Address 7227 N 16TH ST STE 250

City PHOENIX State AZ Zip Code 85020

Purpose of Disbursement
CHARITABLE CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB29.1

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

				.		
--	--	--	--	---	--	--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

				.		
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Memo Item

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

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

2	5	0	0	.	0	0
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2	5	0	0	.	0	0
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