

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 LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)

ADDRESS (number and street) 575 MOUNTAIN AVENUE MURRAY HILL NJ 07974

2. FEC IDENTIFICATION NUMBER C C00471193 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, May 20, Aug 20, Nov 20, Mar 20, Jun 20, Sep 20, Dec 20, Apr 20, Jul 20, Oct 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 04 / 01 / 2015 through 04 / 30 / 2015

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

Type or Print Name of Treasurer Gustave J Gallinot

Signature of Treasurer Gustave J Gallinot [Electronically Filed] Date 05 / 19 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		174021.27
(b) Cash on Hand at Beginning of Reporting Period.....	188075.45	
(c) Total Receipts (from Line 19) .....	4396.31	21260.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	192471.76	195281.38
7. Total Disbursements (from Line 31).....	-2500.00	309.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	194971.76	194971.76
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1311.00	2775.88
(ii) Unitemized .....	3085.31	18484.23
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4396.31	21260.11
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4396.31	21260.11
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	4396.31	21260.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4396.31	21260.11

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-2500.00	-200.00
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	9.62
(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	9.62
29. Other Disbursements .....	0.00	500.00
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)) ..	-2500.00	309.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-2500.00	309.62

**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) .....	4396.31	21260.11
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	9.62
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4396.31	21250.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

**A. Michael J Beckman**  
Full Name (Last, First, Middle Initial)

Mailing Address 575 Mountain Avenue

City New Providence State NJ Zip Code 07974-2097

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

Name of Employer Linde North America Occupation Industry Manager II

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt **04 / 24 / 2015**

**Transaction ID : A1C6FD6F4D05F4223AA1**

Amount of Each Receipt this Period **76.94**

Payroll Deduction: \$38.47/Bi-Weekly

**B. Marian Bozak**  
Full Name (Last, First, Middle Initial)

Mailing Address 575 Mountain Avenue

City New Providence State NJ Zip Code 07974-2097

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

Name of Employer Linde North America Occupation Controller, RBUNA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt **04 / 24 / 2015**

**Transaction ID : A5EC65563BF6545B1A9B**

Amount of Each Receipt this Period **76.94**

Payroll Deduction: \$38.47/Bi-Weekly

**C. Clifford Caldwell**  
Full Name (Last, First, Middle Initial)

Mailing Address 575 Mountain Avenue

City New Providence State NJ Zip Code 07974-2097

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

Name of Employer Linde North America Occupation Head of Electronics and Markets

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt **04 / 24 / 2015**

**Transaction ID : AA419446B6F244B5C9DF**

Amount of Each Receipt this Period **76.94**

Payroll Deduction: \$38.47/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.82</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
	<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)  
**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

**A. Raymond E Carr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 575 Mountain Avenue  
City New Providence State NJ Zip Code 07974-2097  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Linde North America Occupation Head of Global Tonnage Accts, Americas  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **346.14**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AB6010ACE6301401F91A**  
Amount of Each Receipt this Period **76.92**  
Payroll Deduction: \$38.46/Bi-Weekly

**B. Mark DiMaggio**  
Full Name (Last, First, Middle Initial)  
Mailing Address 575 Mountain Avenue  
City New Providence State NJ Zip Code 07974-2097  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Linde North America Occupation Industry Manager II  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **360.00**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AC6E3F7A25B5C4439915**  
Amount of Each Receipt this Period **80.00**  
Payroll Deduction: \$40.00/Bi-Weekly

**C. Daniel E Fisher**  
Full Name (Last, First, Middle Initial)  
Mailing Address 11603 Strang Rd.  
City La Porte State TX Zip Code 77571-9749  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Linde North America Occupation Head of HyCo Operations - Americas  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AA830C90C837143A0927**  
Amount of Each Receipt this Period **76.94**  
Payroll Deduction: \$38.47/Bi-Weekly

**SUBTOTAL** of Receipts This Page (optional)..... **233.86**  
**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 12
	<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)  
**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

**A. Kenneth E Flessner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26 Garwood Tr  
 City Denville State NJ Zip Code 07834-2832  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Head of Supply Americas  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **346.14**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : A526A03E361AD417AB3A**  
 Amount of Each Receipt this Period **76.92**  
 Payroll Deduction: \$38.46/Bi-Weekly

**B. Michael D Heil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 575 Mountain Avenue  
 City New Providence State NJ Zip Code 07974-2097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Group Head Organisation Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AE4B4C754B7C34ED68D3**  
 Amount of Each Receipt this Period **76.94**  
 Payroll Deduction: \$38.47/Bi-Weekly

**C. Thomas A Larkin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 Greenwich St, Ste 200 Ste 200  
 City Stewartsville State NJ Zip Code 08886-2020  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Cantarell Support Manager (P)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AF649C9D0E0384875954**  
 Amount of Each Receipt this Period **76.94**  
 Payroll Deduction: \$38.47/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.80</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 12
<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)  
**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

**A. Scott M Latta**  
Full Name (Last, First, Middle Initial)

Mailing Address 6600 Peachtree Dunwoody Road

City Atlanta	State GA	Zip Code 30328-6773
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FEC ID number of contributing federal political committee. **C**

Name of Employer Linde North America	Occupation Head of Markets Regions South_West
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2015

**Transaction ID : A47C70393669847A49E0**

Amount of Each Receipt this Period  

76.94
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Payroll Deduction: \$38.47/Bi-Weekly

**B. Earl D Lawson**  
Full Name (Last, First, Middle Initial)

Mailing Address 575 Mountain Avenue

City New Providence	State NJ	Zip Code 07974-2097
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FEC ID number of contributing federal political committee. **C**

Name of Employer Linde North America	Occupation Head of Energy Solutions
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2015

**Transaction ID : A008B9BEA7ADA4458AF8**

Amount of Each Receipt this Period  

76.94
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Payroll Deduction: \$38.47/Bi-Weekly

**C. John C MacRitchie**  
Full Name (Last, First, Middle Initial)

Mailing Address 2100 Western Ct, Ste 100  
Ste 100

City Lisle	State IL	Zip Code 60532-1971
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FEC ID number of contributing federal political committee. **C**

Name of Employer Linde North America	Occupation Head Markets Region Midwest
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **346.23**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2015

**Transaction ID : A45AC0F2EDF42481CA4B**

Amount of Each Receipt this Period  

76.94
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Payroll Deduction: \$38.47/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>230.82</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 12
<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)  
**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

**A. Robert B Mayer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 575 Mountain Avenue  
 City New Providence State NJ Zip Code 07974-2097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Head of Tonnage Proposals  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AFAB40A34F20541BC8E4**  
 Amount of Each Receipt this Period **76.94**  
 Payroll Deduction: \$38.47/Bi-Weekly

**B. Claus Nussgruber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 575 Mountain Avenue  
 City New Providence State NJ Zip Code 07974-2097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Head of Clean Energy  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : A4155B64FEFAC423DBDD**  
 Amount of Each Receipt this Period **76.94**  
 Payroll Deduction: \$38.47/Bi-Weekly

**C. Jack E Pederson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2570 Boulevard of the Generals  
 City Norristown State PA Zip Code 19403-3675  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Linde North America Occupation Account Manager II  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **346.23**

Date of Receipt **04 / 24 / 2015**  
**Transaction ID : AEF3CED1729AA47EBAFC**  
 Amount of Each Receipt this Period **76.94**  
 Payroll Deduction: \$38.47/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>230.82</b>
<b>TOTAL</b> 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)

**LINDE NORTH AMERICA INC ALLIANCE FOR GOOD GOVERNMENT (LINDE PAC)**

Full Name (Last, First, Middle Initial)

### A. FAMILIES FOR JAMES LANKFORD

Mailing Address PO BOX 1639

City Bethany State OK Zip Code 73008-1639

Purpose of Disbursement  
VOID - Political Contribution

Candidate Name

**Sen. James P. Lankford**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OK District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2015

**Transaction ID : BB96D4E190DB843948F4**

Amount of Each Disbursement this Period

-2500.00
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### 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

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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### 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

M M M	/	D D D	/	Y Y Y Y Y Y
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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)..... ▶

-2500.00
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-2500.00
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