

# 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

TEA PARTY MAJORITY FUND

ADDRESS (number and street)

2776 S ARLINGTON MILL DR #806

Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00566174

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)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - Convention (12C)
  - General (12G)
  - Special (12S)
  - Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period

[MM] / [DD] / [YYYY] 11 / 29 / 2016 through [MM] / [DD] / [YYYY] 12 / 31 / 2016

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

MACKENZIE, SCOTT B, , ,

Type or Print Name of Treasurer

Signature of Treasurer

MACKENZIE, SCOTT B, , ,

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 02 / 07 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**TEA PARTY MAJORITY FUND**

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"/>		63478.41
(b) Cash on Hand at Beginning of Reporting Period.....	78587.11	
(c) Total Receipts (from Line 19) .....	155333.45	1620085.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	233920.56	1683564.15
7. Total Disbursements (from Line 31).....	221683.05	1671326.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12237.51	12237.51
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

**TEA PARTY MAJORITY FUND**

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).....	19725.00	135681.00
(ii) Unitemized .....	135608.45	1480245.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	155333.45	1615926.56
(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) .....	155333.45	1615926.56
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	4159.18
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)).....▶	155333.45	1620085.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	155333.45	1620085.74

**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 .....	187114.85	529102.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	187114.85	529102.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2250.00	7850.00
24. Independent Expenditures (use Schedule E) .....	32318.20	1134374.48
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	221683.05	1671326.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	221683.05	1671326.64

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	155333.45	1615926.56
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	155333.45	1615926.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	187114.85	529102.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	187114.85	529102.16

**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 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**TEA PARTY MAJORITY FUND**

**A. ADAMS 366, MARGARET T, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8240 HEALY DR  
 City MOBILE State AL Zip Code 36695  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 02 / 2016  
**Transaction ID : SA11AI.60064**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BARNETT 973, FRANK W, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10000 AIRLIE RD  
 City MONMOUTH State OR Zip Code 97361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 12 / 26 / 2016  
**Transaction ID : SA11AI.60241**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BARTLEY 773, ROBERT C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10107 ELDERBERRY PARK LN  
 City TOMBALL State TX Zip Code 77375  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RCB INSURANCE SERVICES LLC Occupation (for Individual) INSURANCE BROKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : SA11AI.60252**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**BEHRENS 531, RICH C, , MR,**

Mailing Address **2323 FOX RIVER PKWY**

City <b>WAUKESHA</b>	State <b>WI</b>	Zip Code <b>53189</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>NONE</b>	Occupation (for Individual) <b>RETIRED</b>
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**12 / 16 / 2016**

**Transaction ID : SA11AI.60301**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**BELK 795, HARLEY A, , MR,**

Mailing Address **6402 FM 2111**

City <b>WINTERS</b>	State <b>TX</b>	Zip Code <b>79567</b>
------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) <b>BELK CATTLE INC</b>	Occupation (for Individual) <b>CORPORATE SECRETARY</b>
---	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**300.00**

Date of Receipt  
**12 / 21 / 2016**

**Transaction ID : SA11AI.60309**

Amount of Each Receipt this Period  
**200.00**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**BENJAMIN 800, DEAN A, , MR,**

Mailing Address **10118 GROVE LOOP  
UNIT A**

City <b>WESTMINSTER</b>	State <b>CO</b>	Zip Code <b>80031</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>NONE</b>	Occupation (for Individual) <b>RETIRED</b>
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
**400.00**

Date of Receipt  
**12 / 13 / 2016**

**Transaction ID : SA11AI.60316**

Amount of Each Receipt this Period  
**100.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>400.00</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 8 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. BICE 575, DONALD L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 31629 277TH ST  
 City WINNER State SD Zip Code 57580  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROOTS AERIAL CROP SPRAYING SRV Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 30 / 2016  
**Transaction ID : SA11AI.60351**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BRADLEY 774, SHARON, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3645 HENDERSON RANCH LN  
 City BELLVILLE State TX Zip Code 77418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : SA11AI.60468**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. BRIGGS 805, ALBERT R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1415 SYLMAR PL  
 City LOVELAND State CO Zip Code 80537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : SA11AI.60512**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

FOR LINE NUMBER: PAGE 9 OF 69  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. BROWN 087, LES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 BAYVIEW AVE  
 City BAYVILLE State NJ Zip Code 08721  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BERKLEY DESIGN Occupation (for Individual) ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 09 / 2016  
**Transaction ID : SA11AI.60532**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BROWN 740, SHERRIE, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 881  
 City CUSHING State OK Zip Code 74023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : SA11AI.60541**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BROWN 863, LINDA, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1093 N WIDE OPEN TRL  
 City PRESCOTT VLY State AZ Zip Code 86314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 12 / 07 / 2016  
**Transaction ID : SA11AI.60546**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 10 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**TEA PARTY MAJORITY FUND**

**A. BROWNING 359, KERRY D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 LARKHAVEN DR

City RAINBOW CITY	State AL	Zip Code 35906
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CB TRAILER & REPAIR	Occupation (for Individual) MECHANIC
--	---

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
12		21		2016

**Transaction ID : SA11AI.60554**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. BUCHWALD 430, JAMES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17156 GLEN RD

City MOUNT VERNON	State OH	Zip Code 43050
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		12		2016

**Transaction ID : SA11AI.60578**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. BUHL 100, HENRY M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 GREENE ST FL 5

City NEW YORK	State NY	Zip Code 10012
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE BUHL FOUNDATION	Occupation (for Individual) CHAIRMAN
--	---

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
12		08		2016

**Transaction ID : SA11AI.60591**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. BULLOCH 945, MARGRETTE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 WINGFOOT ST  
 City MORAGA State CA Zip Code 94556  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 19 / 2016  
**Transaction ID : SA11AI.60598**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BUSCH 923, EDWARD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22071 HURONS AVE  
 City APPLE VALLEY State CA Zip Code 92307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : SA11AI.60625**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. BUZBY 329, SCOTT H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1275 W SOUTHWINDS BLVD  
 City VERO BEACH State FL Zip Code 32963  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : SA11AI.60633**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. CAIN 926, FLORINE, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14 LAGO NORTE

City IRVINE	State CA	Zip Code 92612
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
11	/	30	/	2016

**Transaction ID : SA11AI.60646**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. CALEF 523, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2278 275TH ST

City WASHINGTON	State IA	Zip Code 52353
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
650.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

**Transaction ID : SA11AI.60649**

Amount of Each Receipt this Period  
350.00

Memo Item

**C. CALLAWAY 945, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 GREGORY LN

City PLEASANT HILL	State CA	Zip Code 94523
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) CALLAWAY INSURANCE CO	Occupation (for Individual) INSURANCE BROKER
--	---

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : SA11AI.60657**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. CAMPBELL 191, MARIE M, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2026 E CUMBERLAND ST  
 City PHILADELPHIA State PA Zip Code 19125  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : SA11AI.60664**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. CHAFFEE 494, DAN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3979 EDGEWOOD ST SW  
 City GRANDVILLE State MI Zip Code 49418  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SALEM COMMUNICATIONS Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 26 / 2016  
**Transaction ID : SA11AI.60744**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. CHAMBERS 298, EMILY, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2023 LORRAINE DR SW  
 City AIKEN State SC Zip Code 29801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2016  
**Transaction ID : SA11AI.60749**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. CHAPMAN 170, DONALD M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 307

City LEWISTOWN	State PA	Zip Code 17044
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NITTANY PAPER MILLS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

**Transaction ID : SA11AI.60751**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. CHASE 229, HARLAN, , MR, SR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 JEFFERSON GRN

City WAYNESBORO	State VA	Zip Code 22980
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	01	/	2016

**Transaction ID : SA11AI.60757**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. CHONKO 327, ANDREW, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 WEST LOOP

City OAK HILL	State FL	Zip Code 32759
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	02	/	2016

**Transaction ID : SA11AI.60769**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. CILLUFFO 193, ANTHONY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 518 MEADOWLARK TER  
 City GLEN MILLS State PA Zip Code 19342  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 12 / 21 / 2016  
**Transaction ID : SA11AI.60786**  
 Amount of Each Receipt this Period 400.00  
 Memo Item

**B. COLE 923, FRED, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7920 SANTA PAULA ST  
 City HIGHLAND State CA Zip Code 92346  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COUNTY OF SAN BERNARDINO Occupation (for Individual) ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : SA11AI.60835**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. COLLINS 974, ROBERT C, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3087 POWDER RIVER DR  
 City EUGENE State OR Zip Code 97408  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 12 / 30 / 2016  
**Transaction ID : SA11AI.60847**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	570.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. COLTRANE 177, LORETTA E, , MRS, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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  
 11 / 30 / 2016  
**Transaction ID : SA11AI.60848**

Amount of Each Receipt this Period  
 100.00

Memo Item

**B. CORTEZ 850, LEILANI, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4107 E EARLL DR

City PHOENIX	State AZ	Zip Code 85018
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 23 / 2016  
**Transaction ID : SA11AI.60892**

Amount of Each Receipt this Period  
 250.00

Memo Item

**C. CRAWFORD 760, ALAN M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 215 HIDDEN OAKS DR

City HUDSON OAKS	State TX	Zip Code 76087
---------------------	-------------	-------------------

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

Name of Employer (for Individual) RANGAIRE MANAGEMENT SERVICES LLC	Occupation (for Individual) MANAGER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2016  
**Transaction ID : SA11AI.60927**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. CRUMB 770, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1644 CASTLE CT

City HOUSTON	State TX	Zip Code 77006
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) NEPHROLOGIST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2016

**Transaction ID : SA11AI.60953**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. DAHARSH 820, MICHAEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3400 HALES RANCH RD

City CHEYENNE	State WY	Zip Code 82007
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2016

**Transaction ID : SA11AI.60984**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DAVIDGE 995, RIC, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3705 ARCTIC BLVD

City ANCHORAGE	State AK	Zip Code 99503
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESIDENTIAL CONTRACTOR
--	---

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
12		02		2016

**Transaction ID : SA11AI.61019**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. DILL 828, WILLIAM J, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 BIG GOOSE RD  
 City SHERIDAN State WY Zip Code 82801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 14 / 2016  
**Transaction ID : SA11AI.61124**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. DODGE 722, LINNIE M, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14300 CHENAL PKWY APT 7010  
 City LITTLE ROCK State AR Zip Code 72211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 02 / 2016  
**Transaction ID : SA11AI.61144**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. DONOVAN 852, JOHN F, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7508 E MINNEZONA AVE  
 City SCOTTSDALE State AZ Zip Code 85251  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : SA11AI.61154**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**TEA PARTY MAJORITY FUND**

**A. DOUGHERTY 325, RICHARD P, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1028 STEPHEN DR

City NICEVILLE	State FL	Zip Code 32578
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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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
12		13		2016

**Transaction ID : SA11AI.61169**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. DOUGLASS 652, TOM M, , Mr,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 W BRANDON RD

City COLUMIA	State MO	Zip Code 65203
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		20		2016

**Transaction ID : SA11AI.61178**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. DRUEKE 370, CLAUDINE, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8239 HAWKINS RD

City COLLEGE GROVE	State TN	Zip Code 37046
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

**Transaction ID : SA11AI.61197**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. DUMEY 637, BRENDA K, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 218

City BENTON	State MO	Zip Code 63736
----------------	-------------	-------------------

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

Name of Employer (for Individual) BRENDA K CONSTRUCTION	Occupation (for Individual) SECRETARY
--	--

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
12		08		2016

**Transaction ID : SA11AI.61207**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. DUVERNELL 530, SCOTT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 E DEKORA ST  
APT 103

City SAUKVILLE	State WI	Zip Code 53080
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		16		2016

**Transaction ID : SA11AI.61220**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. EARLY 891, RUTH, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 MORA LN

City LAS VEGAS	State NV	Zip Code 89102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

**Transaction ID : SA11AI.61230**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. EGGE 548, VERNON L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10661 W COUNTY ROAD B

City HAYWARD	State WI	Zip Code 54843
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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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
12	/	21	/	2016

**Transaction ID : SA11AI.61253**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. EPP 231, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9403 MARIE RD

City NEW KENT	State VA	Zip Code 23124
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2016

**Transaction ID : SA11AI.61301**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. EPP 231, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9403 MARIE RD

City NEW KENT	State VA	Zip Code 23124
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	29	/	2016

**Transaction ID : SA11AI.61302**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. ESTELL 358, MARTHA, , MS,**  
Mailing Address 102 PATDEAN DR

City HUNTSVILLE	State AL	Zip Code 35811
--------------------	-------------	-------------------

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

Name of Employer (for Individual) 5TH X COUNTY	Occupation (for Individual) PROBATION OFFICER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2016

**Transaction ID : SA11AI.61321**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. EZELL 850, RAY, , MR,**  
Mailing Address 28417 N 63RD PL

City PHOENIX	State AZ	Zip Code 85005
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SUN VALLEY MANUFACTURING LLC	Occupation (for Individual) 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 Y  
 12 / 12 / 2016

**Transaction ID : SA11AI.61345**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. FALKENBERG 762, ANNALYNE, , MS,**  
Mailing Address 311 LAKESHORE RD

City DENTON	State TX	Zip Code 76208
----------------	-------------	-------------------

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

Name of Employer (for Individual) SOLO FAST & EASY LLC	Occupation (for Individual) MANAGEMENT
---	---

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  
 12 / 16 / 2016

**Transaction ID : SA11AI.61357**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. FEE 100, BERNADETTE T, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 653 E 14TH ST APT 11E

City NEW YORK	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		09		2016

**Transaction ID : SA11AI.61375**

Amount of Each Receipt this Period  
125.00

Memo Item

**B. FIELDMAN 115, JOEL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LN

City ROSLYN HEIGHTS	State NY	Zip Code 11577
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		09		2016

**Transaction ID : SA11AI.61398**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. FISCHER 863, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1444

City CHINO VALLEY	State AZ	Zip Code 86323
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2016

**Transaction ID : SA11AI.61405**

Amount of Each Receipt this Period  
75.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. FLORY 195, ROGER, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 370 HUNTZINGER RD

City WERNERSVILLE	State PA	Zip Code 19565
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		02		2016

**Transaction ID : SA11AI.61428**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. FOTH 441, ARTHUR F, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11221 PEARL RD

City STRONGSVILLE	State OH	Zip Code 44136
----------------------	-------------	-------------------

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

Name of Employer (for Individual) FOTH AND FOTH LPA	Occupation (for Individual) PARTNER
--	--

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
12		23		2016

**Transaction ID : SA11AI.61454**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. GALWAY 940, EVE L, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 PARK MANOR DR

City DALY CITY	State CA	Zip Code 94015
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		06		2016

**Transaction ID : SA11AI.61534**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. GENOVESE 334, ANTHONY J, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3491 CHICKASAW CIR

City GREENACRES	State FL	Zip Code 33467
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	21	/	2016

**Transaction ID : SA11AI.61594**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. GERANDT 731, BART W, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7219 PHEASANT CV

City OKLAHOMA CITY	State OK	Zip Code 73162
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	12	/	2016

**Transaction ID : SA11AI.61606**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. GIVENS 781, W, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22133 OLD NACOGDOCHES RD

City NEW BRAUNFELS	State TX	Zip Code 78132
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) RH & DG GIVENS INC	Occupation (for Individual) VICE PRESIDENT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : SA11AI.61650**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. GOODE 766, ZANDY D, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6014 OLD LORENA RD  
 City LORENA State TX Zip Code 76655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GAVILON FERTILIZER CO Occupation (for Individual) SALESMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 06 / 2016**  
**Transaction ID : SA11AI.61681**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. GOURLAY 481, GERALD L, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10329 CHEROKEE ST  
 City TAYLOR State MI Zip Code 48180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 30 / 2016**  
**Transaction ID : SA11AI.61694**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. HAINES 344, ALICE, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1560 NW 18TH CT  
 City CRYSTAL RIVER State FL Zip Code 34428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 22 / 2016**  
**Transaction ID : SA11AI.61790**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. HALLMAN 770, GRADY L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3443 INWOOD DR

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

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		23		2016

**Transaction ID : SA11AI.61798**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. HAMRICK 281, RACHEL J, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3014 POPLAR CIR

City SHELBY	State NC	Zip Code 28152
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2016

**Transaction ID : SA11AI.61810**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HATTON 992, REBECCA, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9711 E EMPIRE AVE

City SPOKANE	State WA	Zip Code 99206
-----------------	-------------	-------------------

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

Name of Employer (for Individual) HATTON SENIOR FAMILY HOME	Occupation (for Individual) BUSINESS OWNER
--	---

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
12		16		2016

**Transaction ID : SA11AI.61880**

Amount of Each Receipt this Period  
150.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. HAYES 712, PATTY D, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 233 MILLER HAYES RD

City FARMERVILLE	State LA	Zip Code 71241
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		05		2016

**Transaction ID : SA11AI.61901**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. HENRY 436, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3528 MAPLEWAY DR

City TOLEDO	State OH	Zip Code 43614
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		15		2016

**Transaction ID : SA11AI.61955**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. HUTTON 727, MARK, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1600 CLIFTY HWY

City HINDSVILLE	State AR	Zip Code 72738
--------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CONTRACTOR
--	---

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
12		22		2016

**Transaction ID : SA11AI.62173**

Amount of Each Receipt this Period  
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. IRWIN 217, WILLIAM L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7105 UNAKITE CT

City MIDDLETOWN	State MD	Zip Code 21769
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		16		2016

**Transaction ID : SA11AI.62194**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. ISHIZUKA 105, YUKIO, , DR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 PURCHASE ST

City RYE	State NY	Zip Code 10580
-------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHIATRIST
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2016

**Transaction ID : SA11AI.62206**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. JOHNSON 460, ERIC, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

**Transaction ID : SA11AI.62262**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**TEA PARTY MAJORITY FUND**

**A. JONES 432, JOHN R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) JONES FUEL COMPANY	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

**Transaction ID : SA11AI.62290**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. JONES 934, JANET D, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4825 BASELINE AVE

City SANTA YNEZ	State CA	Zip Code 93460
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		07		2016

**Transaction ID : SA11AI.62296**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. KEENAN 734, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3960 EZ ST

City KINGSTON	State OK	Zip Code 73439
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
11		30		2016

**Transaction ID : SA11AI.62366**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. KELTNER 740, DARRELL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2701 CLAREMONT DR

City BARTLESVILLE	State OK	Zip Code 74006
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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  
 12 / 21 / 2016

**Transaction ID : SA11AI.62381**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. KIDWELL 328, MAX, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 308 CINNAMON BARK LN

City ORLANDO	State FL	Zip Code 32835
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2016

**Transaction ID : SA11AI.62413**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. KING 338, IVAN, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3015 SILVERADO TER

City WINTER HAVEN	State FL	Zip Code 33884
----------------------	-------------	-------------------

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

Name of Employer (for Individual) KING ENGINEERING INC	Occupation (for Individual) PRESIDENT
---	--

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  
 12 / 21 / 2016

**Transaction ID : SA11AI.62422**

Amount of Each Receipt this Period  
200.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. KING 433, STEPHEN, , DR, MD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9713 ROSEWOOD QUINCY RD  
 City QUINCY State OH Zip Code 43343  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 21 / 2016**  
**Transaction ID : SA11AI.62425**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. KUBIN 751, ROBERT E, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 212 E GRUBB DR  
 City MESQUITE State TX Zip Code 75149  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DBI MAINTANCE Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 30 / 2016**  
**Transaction ID : SA11AI.62545**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. LARAWAY 078, WAYNE D, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 ASPEN PL  
 City LONG VALLEY State NJ Zip Code 07853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TC TECH LLC Occupation (for Individual) MANAGER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 29 / 2016**  
**Transaction ID : SA11AI.62604**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**TEA PARTY MAJORITY FUND**

**A. LEACH 773, SARA B, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3002 HEATHERPARK DR  
 City KINGWOOD State TX Zip Code 77345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 27 / 2016  
**Transaction ID : SA11AI.62631**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**B. LEFLER 487, JAMES A, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 502 W CRUMP ST  
 City BAY CITY State MI Zip Code 48706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) DISABLED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : SA11AI.62645**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. LEZHNYAK 010, VICTOR N, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 232 RUSSELLVILLE RD  
 City WESTFIELD State MA Zip Code 01085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REFUSED  
 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  
 11 / 30 / 2016  
**Transaction ID : SA11AI.62688**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
LI 852, KUANG, , ,

Mailing Address 2533 E CHESTER DR

City CHANDLER	State AZ	Zip Code 85286
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2016

**Transaction ID : SA11AI.62689**

Amount of Each Receipt this Period  
100.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
LINDSAY 123, FREDRIC, , MR,

Mailing Address 133 SARATOGA RD  
APT 108-4

City GLENVILLE	State NY	Zip Code 12302
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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  
 12 / 19 / 2016

**Transaction ID : SA11AI.62702**

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
LUETH 486, WALTER, , MR,

Mailing Address 5605 PONDVIEW DR

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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  
 12 / 28 / 2016

**Transaction ID : SA11AI.62760**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. MARTIN 175, GERALD, , MR,**  
Mailing Address 247 MENTZER RD

City NEW HOLLAND	State PA	Zip Code 17557
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) GG MARTIN & SONS EXCAVATING & TRUCKING		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>300.00</b>

Date of Receipt  
**12 / 21 / 2016**  
**Transaction ID : SA11AI.62868**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**B. MAXFIELD 770, MARIETTA M, , MS,**  
Mailing Address 11415 HOLIDAN WAY

City HOUSTON	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>800.00</b>

Date of Receipt  
**12 / 13 / 2016**  
**Transaction ID : SA11AI.62896**

Amount of Each Receipt this Period  
**200.00**

Memo Item

**C. MAY 759, JACK B, , MR,**  
Mailing Address 929 US HIGHWAY 287

City WOODVILLE	State TX	Zip Code 75979
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>485.00</b>

Date of Receipt  
**12 / 13 / 2016**  
**Transaction ID : SA11AI.62899**

Amount of Each Receipt this Period  
**50.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>350.00</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 36 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. MCDONALD 774, BARBARA, , MRS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1809 HAWTHORN DR

City RICHMOND	State TX	Zip Code 77469
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
475.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

**Transaction ID : SA11AI.62936**

Amount of Each Receipt this Period  
150.00

Memo Item

**B. MC INTOSH 450, KIMBERLEY, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 72 ROYAL BIRKDALE

City SPRINGBORO	State OH	Zip Code 45066
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		22		2016

**Transaction ID : SA11AI.62911**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. MCINTOSH 730, JERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1727 JENKINS AVE

City NORMAN	State OK	Zip Code 73072
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

**Transaction ID : SA11AI.62956**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1175.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. MCLEOD 206, ELROY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 PAUL HANCE RD

City HUNTINGTOWN	State MD	Zip Code 20639
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	05	/	2016

**Transaction ID : SA11AI.62966**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. MCSPADDEN 920, KAREN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 980 GLENDORA DR

City OCEANSIDE	State CA	Zip Code 92057
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2016

**Transaction ID : SA11AI.62982**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. MEYER 220, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10010 EASTLAKE DR

City FAIRFAX	State VA	Zip Code 22032
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	23	/	2016

**Transaction ID : SA11AI.63016**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. MILLER 467, DAVID N, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 LAKESIDE DR

City ROME CITY	State IN	Zip Code 46784
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SILVER BAY REALTY CORP	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

**Transaction ID : SA11AI.63049**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. MINTON 217, DAVID, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7949 MCKAIG RD

City FREDERICK	State MD	Zip Code 21701
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

**Transaction ID : SA11AI.63075**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. MOORE 260, TERRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 CLEARVIEW HEIGHTS DR

City MOUNDSVILLE	State WV	Zip Code 26041
---------------------	-------------	-------------------

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

Name of Employer (for Individual) WESTFORD HEALTH	Occupation (for Individual) MEDICAL
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

**Transaction ID : SA11AI.63113**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. MORRIS 176, SHIRLEY, , MS,**  
Mailing Address 502 ELIZABETH DR

City LANCASTER	State PA	Zip Code 17601
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
11 / 29 / 2016  
**Transaction ID : SA11AI.63141**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. MORRISON 188, DORIS B, , ,**  
Mailing Address 2863 TINGLEY LAKE RD

City NEW MILFORD	State PA	Zip Code 18834
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
12 / 15 / 2016  
**Transaction ID : SA11AI.63151**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. MOXLEY 339, CHARLES, , MR,**  
Mailing Address 1518 DORCHESTER ST

City PT CHARLOTTE	State FL	Zip Code 33952
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) SMITHFIELD FARMLAND FOODS		Occupation (for Individual) NATIONAL ACCOUNTS MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
12 / 14 / 2016  
**Transaction ID : SA11AI.63177**

Amount of Each Receipt this Period  
150.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 40 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. NELSON 875, LILLIAN, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 115  
 City ALCALDE State NM Zip Code 87511  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : SA11AI.63236**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. NORDGREN 880, ELENA, , MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 502  
 City HILLSBORO State NM Zip Code 88042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 06 / 2016  
**Transaction ID : SA11AI.63283**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. OAKES 563, NANCY, , MRS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 540 17TH ST N  
 City SAINT CLOUD State MN Zip Code 56303  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 12 / 13 / 2016  
**Transaction ID : SA11AI.63300**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. OCHS 617, DAVID T, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 E WATER ST  
 City PONTIAC State IL Zip Code 61764  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 09 / 2016  
**Transaction ID : SA11AI.63304**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. OGNIBENE 113, MARGARET, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6482 83RD ST  
 City MIDDLE VILLAGE State NY Zip Code 11379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : SA11AI.63320**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ORTA 851, CARMEN, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19151 E SPARROW CT  
 City QUEEN CREEK State AZ Zip Code 85142  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EVERBRIDGE Occupation (for Individual) ACCOUNT MANAGEMENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 20 / 2016  
**Transaction ID : SA11AI.63341**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**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 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. OTHOLD 086, CHARLES, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 159 KNAPP AVE

City HAMILTON	State NJ	Zip Code 08610
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
11	/	29	/	2016

**Transaction ID : SA11AI.63346**

Amount of Each Receipt this Period  
200.00

Memo Item

**B. PAINTER 985, BETTY, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17014 161ST AVE SE

City YELM	State WA	Zip Code 98597
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	02	/	2016

**Transaction ID : SA11AI.63373**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. PARKER 705, ROBERT R, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 758

City LAKE ARTHUR	State LA	Zip Code 70549
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

**Transaction ID : SA11AI.63400**

Amount of Each Receipt this Period  
65.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	465.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. PARKS 065, ROGER L, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 RAYNHAM RD

City NEW HAVEN	State CT	Zip Code 06512
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2016

**Transaction ID : SA11AI.63405**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. PECKERD 115, HAROLD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2330 ROCKWOOD AVE

City BALDWIN	State NY	Zip Code 11510
-----------------	-------------	-------------------

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

Name of Employer (for Individual) PECKERD VENETIAN BLINDS	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
245.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

**Transaction ID : SA11AI.63442**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. PETKUS 604, DONALD M, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12401 ARCHER AVE

City LEMONT	State IL	Zip Code 60439
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FUNERAL DIRECTOR
--	---

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
12	/	30	/	2016

**Transaction ID : SA11AI.63478**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	275.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. PINKERTON 456, GLEN, , MR,**  
Mailing Address 759 ALMA OMEGA RD

City WAVERLY	State OH	Zip Code 45690
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) MEAD PAPER CO		Occupation (for Individual) TRUCK DRIVER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>495.00</b>

Date of Receipt  
**12 / 23 / 2016**  
Transaction ID : **SA11AI.63509**

Amount of Each Receipt this Period  
**105.00**

Memo Item

**B. PLEAKE 799, KENNETH F, , MR,**  
Mailing Address 3125 ZION LN

City EL PASO	State TX	Zip Code 79904
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>405.00</b>

Date of Receipt  
**12 / 02 / 2016**  
Transaction ID : **SA11AI.63520**

Amount of Each Receipt this Period  
**50.00**

Memo Item

**C. PUSTA 855, LENORA H, , MS,**  
Mailing Address 138 W SUNFLOWER DR

City PAYSON	State AZ	Zip Code 85541
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>300.00</b>

Date of Receipt  
**12 / 26 / 2016**  
Transaction ID : **SA11AI.63602**

Amount of Each Receipt this Period  
**50.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>205.00</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 45 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. RHEINISH 863, ROBERT K, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 380 LONG BR W

City PRESCOTT	State AZ	Zip Code 86303
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 16 / 2016  
**Transaction ID : SA11AI.63697**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. RIDDLE 264, RICHARD D, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 324 E 7TH ST

City WESTON	State WV	Zip Code 26452
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2016  
**Transaction ID : SA11AI.63716**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. ROBBINS 467, RITA E, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1615 S CLARK RD

City MARKLE	State IN	Zip Code 46770
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 23 / 2016  
**Transaction ID : SA11AI.63752**

Amount of Each Receipt this Period  
50.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. ROBLES 770, IRENE A, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4066 SILVERWOOD DR  
 City HOUSTON State TX Zip Code 77025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BROOKSHIRE GROCERY COMPANY Occupation (for Individual) PHARMACIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 12 / 02 / 2016  
**Transaction ID : SA11AI.63768**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. ROGERS 365, JOAN H, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 109 CRESTVIEW CIR  
 City DAPHNE State AL Zip Code 36526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : SA11AI.63787**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ROLSTON 231, DAVID R, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1404 KATHERINE SHAYE LN  
 City WILLIAMSBURG State VA Zip Code 23185  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROLSTON CONSULTING LLC Occupation (for Individual) BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : SA11AI.63793**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	185.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. ROSAS 515, RICHARD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2813 AVENUE K

City COUNCIL BLFS	State IA	Zip Code 51501
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ROSAS HOLDINGS LLC	Occupation (for Individual) PRINCIPAL
---	--

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
12		21		2016

**Transaction ID : SA11AI.63799**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. ROSS 370, ANN R, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 358 PEARTREE DR

City CLARKSVILLE	State TN	Zip Code 37043
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2016

**Transaction ID : SA11AI.63801**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. ROWLES 230, RHONDA, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 RIDDLES BRIDGE RD

City GOOCHLAND	State VA	Zip Code 23063
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual)
--	-----------------------------

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
12		21		2016

**Transaction ID : SA11AI.63817**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. SCHON 468, THOMAS A, , MR,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 20 / 2016
Mailing Address 10411 GOSHEN RD		<b>Transaction ID : SA11AI.63929</b>
City FORT WAYNE	State IN	Zip Code 46818
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. SCHRECK 500, JAMES, , MR,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 23 / 2016
Mailing Address 1026 150TH ST		<b>Transaction ID : SA11AI.63933</b>
City CHARITON	State IA	Zip Code 50049
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. SCHROEDL 606, ELIZABETH, , MS,</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 21 / 2016
Mailing Address 5043 W GRACE ST		<b>Transaction ID : SA11AI.63940</b>
City CHICAGO	State IL	Zip Code 60641
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. SCOTT 805, RONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8110 LOUDEN CIR

City WINDSOR	State CO	Zip Code 80528
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) SALES
--	--------------------------------------

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
12		16		2016

**Transaction ID : SA11AI.63977**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SHANE 300, LOUISE B, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1875 BETHANY WAY

City ALPHARETTA	State GA	Zip Code 30004
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		05		2016

**Transaction ID : SA11AI.64038**

Amount of Each Receipt this Period  
150.00

Memo Item

**C. SHAW 024, ROBERT, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 LANGDON ST

City NEWTON	State MA	Zip Code 02458
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12		13		2016

**Transaction ID : SA11AI.64045**

Amount of Each Receipt this Period  
150.00

Memo Item

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

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

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

FOR LINE NUMBER: PAGE 50 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. SMITH 378, JAMES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3184 ROY MESSER HWY  
 City WHITE PINE    State TN    Zip Code 37890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE    Occupation (for Individual) RETIRED  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : SA11AI.64150**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. SMITH 984, EDWARD J, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8412 20TH ST W  
 City UNIVERSITY PLACE    State WA    Zip Code 98466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual)    Occupation (for Individual)  
 Receipt For:  Primary     General     Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 29 / 2016  
**Transaction ID : SA11AI.64165**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. SONDHEIMER 801, DAVID H, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2810 HIWALL CT  
 City CASTLE ROCK    State CO    Zip Code 80109  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED    Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary     General     Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2016  
**Transaction ID : SA11AI.64182**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 500.00  
**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 51 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. STANDARD 774, PATRICIA, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11915 BLOOMINGTON LN

City STAFFORD	State TX	Zip Code 77477
------------------	-------------	-------------------

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

Name of Employer (for Individual) PROPHETIC WORD FELLOWSHIP	Occupation (for Individual) DIRECTOR
--	---

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
12		02		2016

**Transaction ID : SA11AI.64223**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. STEGER 244, DONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2875

City STAUNTON	State VA	Zip Code 24402
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2016

**Transaction ID : SA11AI.64244**

Amount of Each Receipt this Period  
75.00

Memo Item

**C. STEVENS 945, DEBORAH, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 156 DIABLO RD STE 300

City DANVILLE	State CA	Zip Code 94526
------------------	-------------	-------------------

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

Name of Employer (for Individual) PRES GROUP INC	Occupation (for Individual) SECRETARY
---	--

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
12		15		2016

**Transaction ID : SA11AI.64267**

Amount of Each Receipt this Period  
200.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. STOBBE 495, JOANNE, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2472 BLANCHARD ST SW

City WYOMING	State MI	Zip Code 49519
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	30	/	2016

**Transaction ID : SA11AI.64272**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. TAVERNETTI 891, TERRELL, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5903 BUFF BAY ST

City LAS VEGAS	State NV	Zip Code 89148
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

**Transaction ID : SA11AI.64380**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. TAYLOR 786, DON, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3151 WENDEL RD

City HARPER	State TX	Zip Code 78631
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2016

**Transaction ID : SA11AI.64387**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. TENBROEK 554, HENRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4533 VANDERVORK AVE

City MINNEAPOLIS	State MN	Zip Code 55436
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	22	/	2016

**Transaction ID : SA11AI.64398**

Amount of Each Receipt this Period  
50.00

Memo Item

**B. TRUCHAN 330, JORDAN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 24 DOCKSIDE LN

City KEY LARGO	State FL	Zip Code 33037
-------------------	-------------	-------------------

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

Name of Employer (for Individual) AMERICAN SHIP MANAGEMENT LLC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2016

**Transaction ID : SA11AI.64483**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. TURNBAUGH 853, DOROTHY, , MS,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16345 W ROOSEVELT ST

City GOODYEAR	State AZ	Zip Code 85338
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
12	/	23	/	2016

**Transaction ID : SA11AI.64500**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. TUROWSKI 601, DANIEL M, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 924 N PRATER AVE  
 City MELROSE PARK State IL Zip Code 60164  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2016  
**Transaction ID : SA11AI.64507**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. UPFIELD 752, KIMBERLY, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3423 PINE TREE CIR  
 City FARMERS BRANCH State TX Zip Code 75234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) Homemaker  
 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  
 12 / 12 / 2016  
**Transaction ID : SA11AI.64523**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. VALK 170, LIZ, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1713 OLMSTED WAY W  
 City CAMP HILL State PA Zip Code 17011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VALK MANUFACTURING Occupation (for Individual) MANAGER  
 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  
 11 / 30 / 2016  
**Transaction ID : SA11AI.64535**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 69
	<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)  
**TEA PARTY MAJORITY FUND**

**A. VOGT 671, MILDRED R, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3001 IVY DR  
 APT 106  
 City NORTH NEWTON State KS Zip Code 67117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2016  
**Transaction ID : SA11Al.64580**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. WARREN 351, GLENDA, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6128 AL HIGHWAY 155  
 City MONTEVALLO State AL Zip Code 35115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) B&J METAL CUTTERS INC Occupation (for Individual) CUSTOMER SERVICE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2016  
**Transaction ID : SA11Al.64641**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WESTENBERG 481, GREGORY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17336 OAK HILL DR  
 City NORTHVILLE State MI Zip Code 48168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ZMW TRAVEL LLC Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 22 / 2016  
**Transaction ID : SA11Al.64719**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 56 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A. WISNIEWSKI 995, JAMES, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 24808 TEAL LOOP  
 City CHUGIAK State AK Zip Code 99567  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2016  
**Transaction ID : SA11AI.64847**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WOLF 648, KARI, , MS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1324 NORTHRIDGE TER  
 City JOPLIN State MO Zip Code 64801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 01 / 2016  
**Transaction ID : SA11AI.64859**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. YODER 465, ORVAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 144  
 City TOPEKA State IN Zip Code 46571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OK SAW AND TOOL INC Occupation (for Individual) TOOL MAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 13 / 2016  
**Transaction ID : SA11AI.64922**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 250.00  
**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 57 OF 69  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ZUBAL 160, THOMAS, , MR,**  
 Mailing Address **212 CLARK AVE**  
 City **BUTLER** State **PA** Zip Code **16002**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  
**12 / 05 / 2016**  
**Transaction ID : SA11AI.64967**  
 Amount of Each Receipt this Period  
**250.00**  
 Memo Item

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>19725.00</b>

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

**A. BAKER HOSTETLER LLP**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 70189

City CLEVELAND State OH Zip Code 44190

Purpose of Disbursement PAC LEGAL SERVICES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 28 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64995**

Amount of Each Disbursement this Period: 40000.00

Memo Item

**B. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement AMEX COLLECTION FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64974**

Amount of Each Disbursement this Period: 7.95

Memo Item

**C. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64974**

Amount of Each Disbursement this Period: 25.00

Memo Item

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

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

40032.95

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

**A. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement INTERCHANGE FEES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64976**

Amount of Each Disbursement this Period: 2281.99

Memo Item

**B. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement MERCHANT DISCOUNT FEES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64977**

Amount of Each Disbursement this Period: 1084.88

Memo Item

**C. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement AMEX DISCOUNT FEES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64978**

Amount of Each Disbursement this Period: 322.72

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3689.59

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

**A. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement  
MERCHANT DISCOUNT FEES

Candidate Name  
**TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64979**

Amount of Each Disbursement this Period: 52.54

Memo Item

**B. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement  
WIRE TRANSFER FEE

Candidate Name  
**TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64980**

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement  
MERCHANT DISCOUNT FEES

Candidate Name  
**TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64981**

Amount of Each Disbursement this Period: 50.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 127.54

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

**A. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64982**

Amount of Each Disbursement this Period: 25.00

Memo Item

**B. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 29 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64983**

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. CAPITALONE BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: C00566174  
**Transaction ID : SB21B.64984**

Amount of Each Disbursement this Period: 25.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 75.00

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

Full Name (Last, First, Middle Initial)

**A. IMAGINE IT DESIGN LLC**

Mailing Address 100 TEAL LN #34

City LAFAYETTE State LA Zip Code 70507

Purpose of Disbursement  
PAC POST-ELECTION WEBSITE UPDATE

**001**  
Category/  
Type

Candidate Name  
**TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00566174

**Transaction ID : SB21B.64993**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
PAC TELEMARKETING

**003**  
Category/  
Type

Candidate Name  
**TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00566174

**Transaction ID : SB21B.64996**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
ALLOCATED TO LINE 24

**003**  
Category/  
Type

Candidate Name  
**TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00566174

**Transaction ID : SB21B.65005**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**TEA PARTY MAJORITY FUND**

Full Name (Last, First, Middle Initial)  
**A. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement PAC TELEMARKETING Category/Type **003**

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: **C00566174**  
**Transaction ID : SB21B.64997**  
Amount of Each Disbursement this Period: 40964.18

Memo Item

Full Name (Last, First, Middle Initial)  
**B. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement PAC TELEMARKETING Category/Type **003**

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement: 12 / 29 / 2016

FEC Identification Number: **C00566174**  
**Transaction ID : SB21B.64998**  
Amount of Each Disbursement this Period: 61589.28

Memo Item

Full Name (Last, First, Middle Initial)  
**C. INFOCISION MANAGEMENT CORP**

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement PAC TELEMARKETING Category/Type **003**

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: **C00566174**  
**Transaction ID : SB21B.64999**  
Amount of Each Disbursement this Period: 400.38

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 102953.84

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

Full Name (Last, First, Middle Initial) <b>A. MACKENZIE &amp; COMPANY</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address 2776 S ARLINGTON MILL DRIVE NUM 806		FEC Identification Number C00566174 <b>Transaction ID : SB21B.64989</b>
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement CONSULTING - COMPLIANCE		Category/ Type 001
Candidate Name <b>TEA PARTY MAJORITY FUND</b>		Amount of Each Disbursement this Period 3500.00
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PARAMOUNT COMMUNICATION GROUP</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2016
Mailing Address 525 K EAST MARKET STREET #114		FEC Identification Number C00566174 <b>Transaction ID : SB21B.64990</b>
City LEESBURG	State VA	Zip Code 20176
Purpose of Disbursement PAC eMAIL SOLICITATIONS / COPY WRITING / REPORTS		Category/ Type 003
Candidate Name <b>TEA PARTY MAJORITY FUND</b>		Amount of Each Disbursement this Period 4506.36
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PARAMOUNT COMMUNICATION GROUP</b>		Date of Disbursement MM / DD / YYYY 12 / 15 / 2016
Mailing Address 525 K EAST MARKET STREET #114		FEC Identification Number C00566174 <b>Transaction ID : SB21B.64991</b>
City LEESBURG	State VA	Zip Code 20176
Purpose of Disbursement PAC eMAIL SOLICITATIONS / DOMAIN REPORTS		Category/ Type 003
Candidate Name <b>TEA PARTY MAJORITY FUND</b>		Amount of Each Disbursement this Period 5136.68
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

13143.04

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

**A. STRATEGIC CAMPAIGN GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 191 MAIN STREET  
SUITE 310

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement PAC SOCIAL MEDIA POSTINGS & UPDATES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y  
12 / 09 / 2016

FEC Identification Number: C C00566174  
**Transaction ID : SB21B.64994**

Amount of Each Disbursement this Period: 1500.00

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) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**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) ▼

Date of Disbursement: M M / D D / Y Y Y Y Y Y

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	187104.85

**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"/> 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)  
**TEA PARTY MAJORITY FUND**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF MIA LOVE</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address PO BOX 255		FEC Identification Number C00505776 <b>Transaction ID : SB23.65013</b>
City RIVERTON	State UT	Zip Code 84065
Purpose of Disbursement 2018 PRIMARY ELECTION		Category/Type 011
Candidate Name <b>LOVE, MIA, , ,</b>		Amount of Each Disbursement this Period 500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: UT	District: 04	

Full Name (Last, First, Middle Initial) <b>B. JOHN KENNEDY FOR US</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 2900 CLEARVIEW PKWY SUITE 206		FEC Identification Number C00608398 <b>Transaction ID : SB23.65012</b>
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement 2016 SPECIAL GENERAL ELECTION CONTRIBUTION		Category/Type 011
Candidate Name <b>KENNEDY, JOHN NEELY, , ,</b>		Amount of Each Disbursement this Period 1250.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	<input type="checkbox"/> Memo Item
State: LA	District: 00	

Full Name (Last, First, Middle Initial) <b>C. KING FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address PO BOX 398 202 W 2ND ST		FEC Identification Number C00373563 <b>Transaction ID : SB23.65015</b>
City WALL LAKE	State IA	Zip Code 51466
Purpose of Disbursement 2016 GENERAL ELECTION DEBT RETIREMENT		Category/Type 011
Candidate Name <b>KING, STEVE MR., , ,</b>		Amount of Each Disbursement this Period 500.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2250.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB23

Transaction ID : SB23.65013

THE CONTRIBUTION WAS ORIGINALLY SENT AS A 2016 GENERAL ELECTION DEBT RETIREMENT DONATION BUT AS MIA LOVE HAD NO DEBT, WE ARE REDESIGNATING THE CONTRIBUTION TO THE 2018 PRIMARY ELECTION.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 69
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**TEA PARTY MAJORITY FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>INFOCISION MANAGEMENT CORP</b>			Nature of Debt (Purpose): <b>IE - VOTER CONTACT CALLS</b>
Mailing Address 325 SPRINGSIDE DRIVE			
City AKRON	State OH	Zip Code 44333	

Outstanding Balance Beginning This Period <input type="text" value="30000.00"/>	Transaction ID : <b>SD10.49237</b>	
Amount Incurred This Period <input type="text" value="126854.93"/>	Payment This Period <input type="text" value="156854.93"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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

Outstanding Balance Beginning This Period <input type="text"/>	Transaction ID :	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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

Outstanding Balance Beginning This Period <input type="text"/>	Transaction ID :	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>TEA PARTY MAJORITY FUND</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; margin-right: 5px;">C</span> C00566174                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>INFOCISION MANAGEMENT CORP</b>		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">                     10 / 07 / 2016                 </div>
Mailing Address <b>325 SPRINGSIDE DRIVE</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     32318.20                 </div>
City <b>AKRON</b>	State <b>OH</b>	
Zip Code <b>44333</b>	Transaction ID : <b>SE.65006</b> Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span> <div style="border: 1px solid black; padding: 2px; display: inline-block;">                     12 / 05 / 2016                 </div>	
Purpose of Expenditure <b>VOTER CONTACT CALLS</b>		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <b>CLINTON, HILLARY RODHAM, , ,</b>		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">766101.32</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                     _____                 </div>
City	State	
Zip Code	Date of Disbursement or Obligation <span style="font-size: 0.8em;">M M / D D / Y Y Y Y Y Y</span>	
Purpose of Expenditure		Category/Type <span style="border: 1px solid black; padding: 2px;">_____</span>
Name of Federal Candidate:		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Support <input type="checkbox"/> Oppose <input type="checkbox"/>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">_____</span>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 32318.20             </div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 _____             </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">                 32318.20             </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

\_\_\_\_\_  
 Signature

[Electronically Filed]

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

02 / 07 / 2017