

# 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

Now or Never PAC

ADDRESS (number and street) 7509 NW Tiffany Springs Pkwy  
Suite 300  
 Check if different than previously reported. (ACC) Kansas City MO 64153

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00513432

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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input checked="" type="checkbox"/> Jan 31 (YE)                |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 11 / 29 / 2016 through M M / D D / Y Y Y Y Y Y 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.

Thomas III, James, C, ,

Type or Print Name of Treasurer

Signature of Treasurer Thomas III, James, C, , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 01 / 17 / 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									
-----------------	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Now or Never PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="475.94"/>	<input type="text" value="475.94"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8548.20"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="0.00"/>	<input type="text" value="11629.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="8548.20"/>	<input type="text" value="12104.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3060.00"/>	<input type="text" value="6616.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5488.20"/>	<input type="text" value="5488.20"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

## DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Now or Never PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
11 / 29 / 2016 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2016

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).....	0.00	5000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	8000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	3629.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	0.00	11629.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	11629.00

**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 .....	3060.00	6616.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3060.00	6616.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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)) ..	3060.00	6616.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3060.00	6616.74

**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) .....	0.00	8000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	8000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3060.00	6616.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	3629.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3060.00	2987.74

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

Form/Schedule: F3XN

Transaction ID :

The Committee is changing from monthly to quarterly reporting as of January 1, 2017.

Form/Schedule:

Transaction ID:

**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

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)  
**Now or Never PAC**

Full Name (Last, First, Middle Initial) <b>A. Law office of James Thomas III</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300		FEC Identification Number C00513432 <b>Transaction ID : SB21B.4787</b>
City Kansas City	State MO	Zip Code 64153
Purpose of Disbursement Legal and Reporting Services		Category/ Type 001
Candidate Name <b>Now or Never PAC</b>		Amount of Each Disbursement this Period 480.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" 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. Law office of James Thomas III</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300		FEC Identification Number C00513432 <b>Transaction ID : SB21B.4790</b>
City Kansas City	State MO	Zip Code 64153
Purpose of Disbursement Legal and Reportong Services		Category/ Type 001
Candidate Name <b>Now or Never PAC</b>		Amount of Each Disbursement this Period 450.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" 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. Law office of James Thomas III</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2016
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300		FEC Identification Number C00513432 <b>Transaction ID : SB21B.4791</b>
City Kansas City	State MO	Zip Code 64153
Purpose of Disbursement Legal and Reporting Services		Category/ Type 001
Candidate Name <b>Now or Never PAC</b>		Amount of Each Disbursement this Period 390.00
Office Sought: <input 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: District:		

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

1320.00

**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

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)  
**Now or Never PAC**

Full Name (Last, First, Middle Initial) <b>A. Law office of James Thomas III</b>			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			FEC Identification Number C00513432 <b>Transaction ID : SB21B.4792</b>	
City Kansas City	State MO	Zip Code 64153	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Legal and Reporting Services		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name <b>Now or Never PAC</b>		Disbursement For: 2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Law office of James Thomas III</b>			Date of Disbursement MM / DD / YYYY 11 / 30 / 2016	
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			FEC Identification Number C00513432 <b>Transaction ID : SB21B.4793</b>	
City Kansas City	State MO	Zip Code 64153	Amount of Each Disbursement this Period 840.00	
Purpose of Disbursement Legal and Reporting Services		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name <b>Now or Never PAC</b>		Disbursement For: 2016		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Law office of James Thomas III</b>			Date of Disbursement MM / DD / YYYY 12 / 13 / 2016	
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			FEC Identification Number C00513432 <b>Transaction ID : SB21B.4785</b>	
City Kansas City	State MO	Zip Code 64153	Amount of Each Disbursement this Period 450.00	
Purpose of Disbursement Legal and Reporting Services		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name <b>Now or Never PAC</b>		Disbursement For: 2018		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1740.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3060.00



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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**Now or Never PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Law office of James Thomas III</b>			Nature of Debt (Purpose): Legal and Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	

Outstanding Balance Beginning This Period 480.00	<b>Transaction ID : SD10.4753</b>	
Amount Incurred This Period 0.00	Payment This Period 480.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Law office of James Thomas III</b>			Nature of Debt (Purpose): Legal and Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	

Outstanding Balance Beginning This Period 450.00	<b>Transaction ID : SD10.4755</b>	
Amount Incurred This Period 0.00	Payment This Period 450.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Law office of James Thomas III</b>			Nature of Debt (Purpose): Legal and Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	

Outstanding Balance Beginning This Period 390.00	<b>Transaction ID : SD10.4767</b>	
Amount Incurred This Period 0.00	Payment This Period 390.00	Outstanding Balance at Close of This Period 0.00

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)  
**Now or Never PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Law office of James Thomas III</b>			Nature of Debt (Purpose): Legal and Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	

Outstanding Balance Beginning This Period <input type="text" value="450.00"/>	<b>Transaction ID : SD10.4777</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="450.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Law office of James Thomas III</b>			Nature of Debt (Purpose): Legal Fees and Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			
City Kansas City	State MO	Zip Code 64153	

Outstanding Balance Beginning This Period <input type="text" value="840.00"/>	<b>Transaction ID : SD10.4782</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="840.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

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"/>		
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"/>