



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**PACEG COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="23519.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23519.48"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="16945.45"/>	<input type="text" value="16945.45"/>
(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="40464.93"/>	<input type="text" value="40464.93"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20660.00"/>	<input type="text" value="20660.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19804.93"/>	<input type="text" value="19804.93"/>
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. 06/2004)

Write or Type Committee Name  
**PAC EG COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15243.90	15243.90
(ii) Unitemized .....	1701.55	1701.55
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	16945.45	16945.45
(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) .....	16945.45	16945.45
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	16945.45	16945.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	16945.45	16945.45

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20500.00	20500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	160.00	160.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	20660.00	20660.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20660.00	20660.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	16945.45	16945.45
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16945.45	16945.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 16
	(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

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)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. RALPH W. ARTHUR**

Mailing Address 210 S. PRAIRIE VIEW DRIVE #528

City	State	Zip Code
WEST DES MONES	IA	50266

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

Name of Employer	Occupation
RUAN TRANS. MGMT SYSTEMS	SENIOR V.P. OF SALES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
326.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : SA11AI.10065**

Amount of Each Receipt this Period  
326.76

Memo Item

Full Name (Last, First, Middle Initial)  
**B. TRACEY BALL**

Mailing Address 3901 73RD STREET

City	State	Zip Code
DES MOINES	IA	50322

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

Name of Employer	Occupation
RUAN, INCORPORATED	CHIEF FINANCIAL OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11AI.10067**

Amount of Each Receipt this Period  
249.99

Memo Item

Full Name (Last, First, Middle Initial)  
**C. CHRISTOPHER FISH**

Mailing Address 2096 ASHFORD ROAD

City	State	Zip Code
BETTENDORF	IA	52722

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

Name of Employer	Occupation
RUAN TRANSPORT CORPORATION	REGION MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : SA11AI.10076**

Amount of Each Receipt this Period  
203.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	779.75
<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 7 OF 16
	(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)  
**PACEG COMMITTEE**

**A. J.W. FLIES**  
Full Name (Last, First, Middle Initial)

Mailing Address 1939 T AVENUE

City DALLAS CENTER State IA Zip Code 50063

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

Name of Employer RUAN TRANSPORT Occupation SENIOR V.P. MIDWEST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 269.22

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2016

**Transaction ID : SA11AI.10077**

Amount of Each Receipt this Period  
 269.22

Memo Item

**B. CRAIG A. GESME**  
Full Name (Last, First, Middle Initial)

Mailing Address 3913 SW 14TH STREET

City DES MOINES State IA Zip Code 50315

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

Name of Employer RUAN TRANS. MGMT SYSTEMS Occupation ADMIN. ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.95

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 09 / 2016

**Transaction ID : SA11AI.10079**

Amount of Each Receipt this Period  
 201.95

Memo Item

**C. LISA GONNERMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 813 S CARROLL STREET

City SLATER State IA Zip Code 50244-9705

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

Name of Employer RUAN TRANSPORTATION Occupation DIRECTOR - SAFETY SERVICES

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  
 02 / 29 / 2016

**Transaction ID : SA11AI.10081**

Amount of Each Receipt this Period  
 600.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1071.17

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
	<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)  
**PACEG COMMITTEE**

**A. ROBERT S. HOGSTAD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2055 COUNTRYCLUB BLVD  
 City CLIVE State IA Zip Code 50325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RUAN TRANS. MGMT SYSTEMS Occupation AREA DIRECTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : SA11AI.10082**  
 Amount of Each Receipt this Period  
 210.00  
 Memo Item

**B. STEVEN W MCDANIELS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19011 SE 228TH STREET  
 City RENTON State WA Zip Code 98058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RUAN TRANSPORT CORPORATION Occupation TERMINAL MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 04 / 2016  
**Transaction ID : SA11AI.10086**  
 Amount of Each Receipt this Period  
 230.00  
 Memo Item

**C. BEN MCLEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 FOSTER DRIVE  
 City DES MOINES State IA Zip Code 50312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RUAN TRANSPORT CORPORATION Occupation ASSISTANT CHIEF INFORMATIN OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 05 / 2016  
**Transaction ID : SA11AI.10087**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2940.00
<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 9 OF 16
	<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)  
**PACEG COMMITTEE**

**A. DAVID J PECENKA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1450 OFFICE PARK ROAD, #207

City WEST DES MOINES	State IA	Zip Code 50265
-------------------------	-------------	-------------------

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

Name of Employer RUAN LOGISTICS COMPANY	Occupation DIRECTOR OF LOGISTICS PRICING
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2016

**Transaction ID : SA11AI.10091**

Amount of Each Receipt this Period  
203.00

Memo Item

**B. MICK PETTIT**  
Full Name (Last, First, Middle Initial)

Mailing Address 5796 HIGHWAY 92

City PROLE	State IA	Zip Code 50229
---------------	-------------	-------------------

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

Name of Employer RUAN TRANSPORT CORPORATION	Occupation SALES MANAGER
--	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	05	/	2016

**Transaction ID : SA11AI.10092**

Amount of Each Receipt this Period  
750.00

Memo Item

**C. RON ROMIG**  
Full Name (Last, First, Middle Initial)

Mailing Address 5849 S. WINWOOD DRIVE

City JOHNSTON	State IA	Zip Code 50131
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FEC ID number of contributing federal political committee. **C**

Name of Employer RUAN LEASING COMPANY	Occupation OPERATIONS MANAGER
--	----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.99

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2016

**Transaction ID : SA11AI.10095**

Amount of Each Receipt this Period  
249.99

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1202.99
<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 10 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**PAC EG COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ELIZABETH J. RUAN**

Mailing Address **23 - 34TH STREET**

City **DES MOINES**      State **IA**      Zip Code **50312**

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

Name of Employer **RUAN TRANSPORT**      Occupation **SHAREHOLDER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**01 / 19 / 2016**  
**Transaction ID : SA11AI.10097**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

Full Name (Last, First, Middle Initial)  
**B. JOHN RUAN III**

Mailing Address **465 FOSTER DRIVE**

City **DES MOINES**      State **IA**      Zip Code **50312**

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

Name of Employer **RUAN, INCORPORATED**      Occupation **PRESIDENT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**4249.99**

Date of Receipt  
**01 / 19 / 2016**  
**Transaction ID : SA11AI.10098**

Amount of Each Receipt this Period  
**4249.99**

Memo Item

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

Mailing Address

City      State      Zip Code

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

Name of Employer      Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>9249.99</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>15243.90</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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

**A. BROWN, CORRINE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 40087

City JACKSONVILLE State FL Zip Code 32203

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: FL District: 05

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10129**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. DAVID ROUZER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2267

City SMITHFIELD State NC Zip Code 27577

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: NC District: 07

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10142**

Amount of Each Disbursement this Period: 500.00

Memo Item

**C. DENHAM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2150 RIVER PLAZA DR., #150

City SACRAMENTO State CA Zip Code 95833

Purpose of Disbursement CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: CA District: 10

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10125**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2500.00

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

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DUNCAN D. HUNTER FOR CONGRESS**

Mailing Address PO BOX 1545

City EL CAJON State CA Zip Code 92022

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: CA District: 50

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10133

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOHN BARRASSO**

Mailing Address PO BOX 52008

City CASPER State WY Zip Code 82605

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WY District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10139

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF KELLY AYOTTE INC**

Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: NH District: 00

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10140

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. HOOSIERS FOR ROKITA, INC.**

Mailing Address 5802 OAK AVENUE

City INDIANAPOLIS State IN Zip Code 46219

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: IN District: 04

Disbursement For: 1000  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10135**

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. KEVIN MCCARTHY FOR CONGRESS**

Mailing Address PO BOX 12667

City BAKERSFIELD State CA Zip Code 93389

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: CA District: 23

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10141**

Amount of Each Disbursement this Period: 2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. LOBIONDO FOR CONGRESS**

Mailing Address P. O. BOX 550

City VINELAND State NJ Zip Code 08362

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
State: NJ District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 01 / 19 / 2016

Transaction ID : **SB23.10126**

Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4000.00

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

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LOU BARLETTA FOR CONGRESS**

Mailing Address P.O. BOX 128

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10137

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MARIO DIAZ-BALART FOR CONGRESS**

Mailing Address 8724 SW 72ND STREET  
# 420

City MIAMI State FL Zip Code 33173

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: FL District: 25

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10138

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MCHENRY LEADERSHIP FUND**

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10131

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RIBBLE FOR CONGRESS**

Mailing Address PO BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: WI District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10130

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RYAN COSTELLO FOR CONGRESS**

Mailing Address PO BOX 3154

City WEST CHESTER State PA Zip Code 19381

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 06

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10134

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SESSIONS, PETE MR.**

Mailing Address PO BOX 823047

City DALLAS State TX Zip Code 75382

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: TX District: 32

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 19 / 2016

Transaction ID : SB23.10136

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PACEG COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US CHAMBER OF COMMERCE PAC (NCAP)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2016

Mailing Address 1615 H ST N W

**Transaction ID : SB23.10143**

City WASHINGTON State DC Zip Code 20062

Amount of Each Disbursement this Period

5000.00
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Purpose of Disbursement  
PAC CONTRIBUTION

Category/ Type
-------------------

Candidate Name

Memo Item

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Memo Item

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Memo Item

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

5000.00
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**TOTAL** This Period (last page this line number only)..... ▶

20500.00
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