

**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

THE LOOSE GROUP

ADDRESS (number and street)

PO BOX 78093

Check if different  
than previously  
reported. (ACC)

ATLANTA

GA

30357

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00010793

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M /

D D /

Y Y Y Y Y Y

11

08

2016

in the  
State of

GA

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ 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

10

01

2016

through

M M /

D D /

Y Y Y Y Y Y

10

19

2016

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

Baker, James, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Baker, James, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

05

16

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)

Page 2

Write or Type Committee Name

THE LOOSE GROUP

Report Covering the Period:

From:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 10  |   | 01  |   | 2016      |

To:

|     |   |     |   |           |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 10  |   | 19  |   | 2016      |

|  | COLUMN A<br>This Period                               | COLUMN B<br>Calendar Year-to-Date |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
|--|---|-----------------------------------|---|---|---|------|--|-----------|--|--|--|---|----------|--|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table> | Y   | Y                                 | Y | Y | Y | 2016 |  |           |  |  |  | <table><tr><td colspan="5">54061.21</td></tr></table> | 54061.21 |  |  |  |  |
| Y  | Y   | Y                                 | Y | Y |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 2016   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 54061.21   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <table><tr><td colspan="5">88934.06</td></tr></table> | 88934.06                          |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 88934.06   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (c) Total Receipts (from Line 19) .....  | <table><tr><td colspan="5">3350.00</td></tr></table>  | 3350.00                           |   |   |   |      | <table><tr><td colspan="5">72325.00</td></tr></table>  | 72325.00  |  |  |  |   |          |  |  |  |  |
| 3350.00  |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 72325.00   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....  | <table><tr><td colspan="5">92284.06</td></tr></table> | 92284.06                          |   |   |   |      | <table><tr><td colspan="5">126386.21</td></tr></table> | 126386.21 |  |  |  |   |          |  |  |  |  |
| 92284.06   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 126386.21  |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 7. Total Disbursements (from Line 31).....   | <table><tr><td colspan="5">83000.00</td></tr></table> | 83000.00                          |   |   |   |      | <table><tr><td colspan="5">117102.15</td></tr></table> | 117102.15 |  |  |  |   |          |  |  |  |  |
| 83000.00   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 117102.15  |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....  | <table><tr><td colspan="5">9284.06</td></tr></table>  | 9284.06                           |   |   |   |      | <table><tr><td colspan="5">9284.06</td></tr></table>   | 9284.06   |  |  |  |   |          |  |  |  |  |
| 9284.06  |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 9284.06  |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                                | <table><tr><td colspan="5">0.00</td></tr></table>     | 0.00                              |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 0.00   |   |                                   |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....                               | <table><tr><td colspan="5">0.00</td></tr></table>     | 0.00                              |   |   |   |      |  |           |  |  |  |   |          |  |  |  |  |
| 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)

Page 3

Write or Type Committee Name

**THE LOOSE GROUP**

Report Covering the Period:

From:

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  | / | 01  | / | 2016        |

To:

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  | / | 19  | / | 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).....

3350.00

72325.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3350.00

72325.00

(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) .....

3350.00

72325.00

## 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

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)) .....

3350.00

72325.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

3350.00

72325.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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                          | 4102.15                           |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 0.00                          | 4102.15                           |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 80000.00                      | 110000.00                         |
| 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).....                                 | 3000.00                       | 3000.00                           |
| 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)) ..      | 83000.00                      | 117102.15                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 83000.00                      | 117102.15                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/<br>Operating Expenditures                                    | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 3350.00                       | 72325.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 3350.00                       | 72325.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                          | 4102.15                           |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 0.00                          | 4102.15                           |

# **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 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THE LOOSE GROUP**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Baker, James, , ,**

Mailing Address PO BOX 78093

City  
Atlanta

State  
GA

Zip Code  
30357

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2016

Transaction ID : SA11AI.4299

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Dubose III, Beverly, M, ,**

Mailing Address NA

City  
ATLANTA

State  
GA

Zip Code  
30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
National Center For The Americ

Occupation (for Individual)  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID : SA11AI.4301

Amount of Each Receipt this Period

2100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Tanenblatt, Eric, , ,**

Mailing Address 1000 FOXCROFT ROAD NW

City  
Atlanta

State  
GA

Zip Code  
30327

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Mc Kenna Long & Aldridge

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 05 / 2016

Transaction ID : SA11AI.4300

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3350.00

3350.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 11

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <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)

**THE LOOSE GROUP**

Full Name (Last, First, Middle Initial)

**A. CONGRESSIONAL LEADERSHIP FUND**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 06    |   | 2016        |

Mailing Address 1747 PENNSYLVANIA AVENUE NW  
5TH FLOORCity  
WASHINGTONState  
DCZip Code  
20006

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** C00504530**Transaction ID : SB23.4310**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOE HECK**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 06    |   | 2016        |

Mailing Address PO BOX 753908

City  
LAS VEGASState  
NVZip Code  
89136

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** C00580688**Transaction ID : SB23.4313**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF KELLY AYOTTE INC**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10    |   | 06    |   | 2016        |

Mailing Address PO BOX 937

City  
MANCHESTERState  
NHZip Code  
03105

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH

District: 00

FEC Identification Number

**C** C00464297**Transaction ID : SB23.4319**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

25000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 11

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <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)

**THE LOOSE GROUP**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF PAT TOOMEY**

Mailing Address 228 S. WASHINGTON ST., SUITE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA

District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 |   |   | 0 | 6 |   |   | 2 | 0 | 1 | 6 |   |   |

FEC Identification Number

**C** C00461046**Transaction ID : SB23.4321**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ROY BLUNT**

Mailing Address PO BOX 10178

City  
COLUMBIAState  
MOZip Code  
65205

Purpose of Disbursement

Candidate Name

**FRIENDS OF ROY BLUNT**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO

District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 |   |   | 0 | 6 |   |   | 2 | 0 | 1 | 6 |   |   |

FEC Identification Number

**C** C00304758**Transaction ID : SB23.4325**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF TODD YOUNG, INC.**

Mailing Address PO BOX 1053

City  
BLOOMINGTONState  
INZip Code  
47402

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 00

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 |   |   | 0 | 6 |   |   | 2 | 0 | 1 | 6 |   |   |

FEC Identification Number

**C** C00459255**Transaction ID : SB23.4328**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 11

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <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)

**THE LOOSE GROUP**

Full Name (Last, First, Middle Initial)

**A. GEORGIA REPUBLICAN PARTY, INC.**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

Mailing Address P. O. BOX 550008

City  
ATLANTAState  
GAZip Code  
30355

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** C00150672**Transaction ID : SB23.4330**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARCO RUBIO FOR SENATE**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

Mailing Address PO BOX 661537

City  
MIAMIState  
FLZip Code  
33266

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 00

FEC Identification Number

**C** C00620518**Transaction ID : SB23.4332**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCAIN, JOHN S, , ,**

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

Mailing Address 228 SOUTH WASHINGTON ST STE 115

City  
ALEXANDRIAState  
VAZip Code  
22314

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C** c00540310**Transaction ID : SB23.4315**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 11

|                              |                              |  |                             |                              |
|------------------------------|------------------------------|--|-----------------------------|------------------------------|
| <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)

**THE LOOSE GROUP**

Full Name (Last, First, Middle Initial)

**A. NRSC**

Mailing Address 425 2ND STREET NE

City  
WASHINGTONState  
DCZip Code  
20002

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

FEC Identification Number

**C** C00027466**Transaction ID : SB23.4334**

Amount of Each Disbursement this Period

15000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PORTMAN FOR SENATE COMMITTEE**

Mailing Address 9856 ARCHER LANE

City  
DUBLINState  
OHZip Code  
43017

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 00

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

FEC Identification Number

**C** C00458463**Transaction ID : SB23.4347**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RON JOHNSON FOR SENATE INC**

Mailing Address 138 CONANT STREET 2ND FLOOR

City  
BEVERLYState  
MAZip Code  
01915

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 00

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 10    |   | 06    |   | 2016      |

FEC Identification Number

**C** C00482984**Transaction ID : SB23.4348**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25000.00

80000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 11

|                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**THE LOOSE GROUP**

Full Name (Last, First, Middle Initial)

**A. GEORGIA REPUBLICAN PARTY, INC.**

Date of Disbursement

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 06  |   | 2016        |

Mailing Address P. O. BOX 550008

City  
ATLANTAState  
GAZip Code  
30355

Purpose of Disbursement

FEC Identification Number

**C** C00150672**Transaction ID : SB29.4391**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Candidate Name

**GEORGIA REPUBLICAN PARTY, INC.**Category/  
Type

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 | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Category/  
Type

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 | / | D D | / | Y Y Y Y Y Y |
|     |   |     |   |             |

Mailing Address

City

State

Zip Code

Purpose of Disbursement

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

3000.00

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

3000.00