

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

Americans for the Arts Action Fund PAC

ADDRESS (number and street) 1000 Vermont Avenue, NW 6th FL

Check if different than previously reported. (ACC) Washington DC 20005

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

C C00410126

3. IS THIS REPORT NEW (N) OR AMENDED (A) 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)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

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] 01 / 01 / 2015 through [MM] / [DD] / [YYYY] 06 / 30 / 2015

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

Type or Print Name of Treasurer Nina Ozlu Tunceli

Signature of Treasurer *Nina Ozlu Tunceli* [Electronically Filed] Date [MM] / [DD] / [YYYY] 01 / 12 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Americans for the Arts Action Fund PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="187831.30"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="187831.30"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="26698.22"/>	<input type="text" value="26698.22"/>
(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="214529.52"/>	<input type="text" value="214529.52"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19500.00"/>	<input type="text" value="19500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="195029.52"/>	<input type="text" value="195029.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Write or Type Committee Name

Americans for the Arts Action Fund PAC

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).....	10454.00	37922.36
(ii) Unitemized	16244.22	48194.30
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	26698.22	26698.22
(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)	26698.22	26698.22
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))..... ▶	26698.22	26698.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26698.22	26698.22

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.....	19500.00	19500.00
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	0.00	0.00
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)) ..	19500.00	19500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19500.00	19500.00

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)	26698.22	26698.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26698.22	26698.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

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

NAME OF COMMITTEE (In Full)
Americans for the Arts Action Fund PAC

A. Leslie Blanton
 Full Name (Last, First, Middle Initial)
 Mailing Address 3347 Chevy Chase Dr.
 City Houston State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer None Occupation Housewife
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015
Transaction ID : C2947434
 Amount of Each Receipt this Period
 1000.00

B. Robert Bush, Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 4609 Curraghmore Rd
 City Charlotte State NC Zip Code 28210-2701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Arts and Science Council of Charlotte Occupation arts administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : C3038118
 Amount of Each Receipt this Period
 250.00

C. Ken Fergeson
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 598
 City Altus State OK Zip Code 73522-0598
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NBanC Occupation Banker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : C2926567
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 7 OF 17
	<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)
Americans for the Arts Action Fund PAC

A. Bill Kerr
Full Name (Last, First, Middle Initial)
Mailing Address 11409 Golfview Ln
City North Palm Beach State FL Zip Code 33408-3305
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 03 / 2015
Transaction ID : C2978274
Amount of Each Receipt this Period
500.00

B. Margot H. Knight
Full Name (Last, First, Middle Initial)
Mailing Address 2650 Bear Gulch Road
City Woodside State CA Zip Code 94062
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 604.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 03 / 2015
Transaction ID : C2927721
Amount of Each Receipt this Period
84.00

C. Margot H. Knight
Full Name (Last, First, Middle Initial)
Mailing Address 2650 Bear Gulch Road
City Woodside State CA Zip Code 94062
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 604.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 03 / 2015
Transaction ID : C2936494
Amount of Each Receipt this Period
84.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 668.00
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 8 OF 17
	(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)
Americans for the Arts Action Fund PAC

A. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside	State CA	Zip Code 94062
------------------	-------------	-------------------

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

Name of Employer Djerassi Resident Artists Program	Occupation Arts Administrator
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	03	/	2015

Transaction ID : C2990431

Amount of Each Receipt this Period

84.00

B. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside	State CA	Zip Code 94062
------------------	-------------	-------------------

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

Name of Employer Djerassi Resident Artists Program	Occupation Arts Administrator
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2015

Transaction ID : C2948515

Amount of Each Receipt this Period

50.00

C. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside	State CA	Zip Code 94062
------------------	-------------	-------------------

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

Name of Employer Djerassi Resident Artists Program	Occupation Arts Administrator
---	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2015

Transaction ID : C2964684

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	184.00
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 9 OF 17
	<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)
Americans for the Arts Action Fund PAC

A. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside State CA Zip Code 94062

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

Name of Employer Djerassi Resident Artists Program Occupation Arts Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt **04 / 03 / 2015**

Transaction ID : C2990432

Amount of Each Receipt this Period **84.00**

B. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside State CA Zip Code 94062

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

Name of Employer Djerassi Resident Artists Program Occupation Arts Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt **05 / 03 / 2015**

Transaction ID : C3017373

Amount of Each Receipt this Period **84.00**

C. Margot H. Knight
Full Name (Last, First, Middle Initial)

Mailing Address 2650 Bear Gulch Road

City Woodside State CA Zip Code 94062

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

Name of Employer Djerassi Resident Artists Program Occupation Arts Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **604.00**

Date of Receipt **06 / 03 / 2015**

Transaction ID : C3036563

Amount of Each Receipt this Period **84.00**

SUBTOTAL of Receipts This Page (optional).....▶	252.00
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 10 OF 17
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Americans for the Arts Action Fund PAC

A. William Lehr
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 917

City Hershey State PA Zip Code 17033

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

Name of Employer Capital Blue Cross Occupation Chairman and CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2015
Transaction ID : C3022839

Amount of Each Receipt this Period
 3000.00

B. Deborah Margol
Full Name (Last, First, Middle Initial)

Mailing Address 3694 Barbados Avenue

City Cooper City State FL Zip Code 33026

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

Name of Employer Miami-Dade County Dept of Cultural Aff Occupation Information Requested

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
 03 / 19 / 2015
Transaction ID : C2994182

Amount of Each Receipt this Period
 250.00

c. Deborah Margol
Full Name (Last, First, Middle Initial)

Mailing Address 3694 Barbados Avenue

City Cooper City State FL Zip Code 33026

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

Name of Employer Miami-Dade County Dept of Cultural Aff Occupation Information Requested

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
 06 / 10 / 2015
Transaction ID : C3036773

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	3300.00
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 11 OF 17
	<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)
Americans for the Arts Action Fund PAC

A. Sandy McDade
Full Name (Last, First, Middle Initial)

Mailing Address 512 B Prospect Street

City Seattle State WA Zip Code 98109

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
01 / 13 / 2015
Transaction ID : C2908346

Amount of Each Receipt this Period
1000.00

B. Steven Spiess
Full Name (Last, First, Middle Initial)

Mailing Address 1087 Briar Way

City Fort Lee State NJ Zip Code 07024

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

Name of Employer Occupation
Cravath, Swaine & Moore LLP Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 07 / 2015
Transaction ID : C2967552

Amount of Each Receipt this Period
1000.00

C. Michael Spring
Full Name (Last, First, Middle Initial)

Mailing Address 111 NW 1st Street, #625

City Miami State FL Zip Code 33128

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

Name of Employer Occupation
Miami-Dade County Department of Cultur Director, Department of Cultural Affai

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 12 / 2015
Transaction ID : C3038009

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2250.00

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 12 OF 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Americans for the Arts Action Fund PAC

A. Nancy Stephens
 Full Name (Last, First, Middle Initial)
 Mailing Address 255 N Saltair Ave.
 City Los Angeles State CA Zip Code 90049
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Actor and Activist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2015
Transaction ID : C2926560
 Amount of Each Receipt this Period
 1000.00

B. Elisa Turner
 Full Name (Last, First, Middle Initial)
 Mailing Address 4966 Hammock Lake Dr
 City Coral Gables State FL Zip Code 33156-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 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
 03 / 30 / 2015
Transaction ID : C2969232
 Amount of Each Receipt this Period
 300.00

C. Dianne Vapnek
 Full Name (Last, First, Middle Initial)
 Mailing Address 1920 Garden St.
 City Santa Barbara State CA Zip Code 93101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Executive Director non-profit
 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
 03 / 12 / 2015
Transaction ID : C2946154
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional).....▶	1550.00
TOTAL This Period (last page this line number only).....▶	10454.00

**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)
Americans for the Arts Action Fund PAC

Full Name (Last, First, Middle Initial) A. MALONEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 01 / 2015
Mailing Address 49 EAST 92ND STREET		Transaction ID : D165252
City NEW YORK	State NY	
Zip Code 10128	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 1500.00
Candidate Name Rep. Carolyn B. Maloney	Category/ Type	
Office Sought: <input checked="" 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) ▼	
State: NY District: 14		

Full Name (Last, First, Middle Initial) B. CICILLINE COMMITTEE		Date of Disbursement MM / DD / YYYY 05 / 14 / 2015
Mailing Address 3701 Porter St. NW		Transaction ID : D165992
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. David Cicilline	Category/ Type	
Office Sought: <input checked="" 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) ▼	
State: RI District: 01		

Full Name (Last, First, Middle Initial) C. NADLER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 04 / 22 / 2015
Mailing Address Village Station, PO Box 40		Transaction ID : D165616
City New York	State NY	
Zip Code 10014	Purpose of Disbursement Candidate Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Jerrold Nadler	Category/ Type	
Office Sought: <input checked="" 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) ▼	
State: NY District: 08		

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
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)

Americans for the Arts Action Fund PAC

Full Name (Last, First, Middle Initial)

A. KEN CALVERT FOR CONGRESS COMMITTEE

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Ken Calvert

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : D165492

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. KEN CALVERT FOR CONGRESS COMMITTEE

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Ken Calvert

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2015

Transaction ID : D165493

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LANCE FOR CONGRESS

Mailing Address Pendleton St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Leonard Lance

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NJ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2015

Transaction ID : D166396

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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**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)
Americans for the Arts Action Fund PAC

Full Name (Last, First, Middle Initial)

A. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2015

Mailing Address P.O. Box 730

Transaction ID : D164441

City Honeoye State NY Zip Code 14471

Amount of Each Disbursement this Period

5,000.00

Purpose of Disbursement
Candidate Contribution

--

Candidate Name

Rep. Louise M. Slaughter

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 28

Full Name (Last, First, Middle Initial)

B. SIMPSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2015

Mailing Address 1487 PARKWAY DRIVE

Transaction ID : D165494

City BLACKFOOT State ID Zip Code 83221

Amount of Each Disbursement this Period

1,000.00

Purpose of Disbursement
Candidate Contribution

--

Candidate Name

Rep. Mike Simpson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: ID District: 02

Full Name (Last, First, Middle Initial)

C. NITA LOWEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2015

Mailing Address PO Box 271

Transaction ID : D165993

City White Plains State NY Zip Code 10605

Amount of Each Disbursement this Period

1,000.00

Purpose of Disbursement
Candidate Contribution

--

Candidate Name

Rep. Nita M. Lowey

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District: 18

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

7,000.00

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

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**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)
Americans for the Arts Action Fund PAC

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS

Mailing Address 700 13th Street, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Steny H. Hoyer

Office Sought: House
 Senate
 President
State: MD District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 10 / 2015

Transaction ID : D164506

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1400

City MELVILLE State NY Zip Code 11747

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Steve Israel

Office Sought: House
 Senate
 President
State: NY District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2015

Transaction ID : D164681

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BONAMICI FOR CONGRESS

Mailing Address 3321 SE 20TH AVE

City PORTLAND State OR Zip Code 97202

Purpose of Disbursement
Candidate Contribution

Candidate Name

Rep. Suzanne Bonamici

Office Sought: House
 Senate
 President
State: OR District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 14 / 2015

Transaction ID : D164232

Amount of Each Disbursement this Period

1500.00

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

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

3500.00

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)
Americans for the Arts Action Fund PAC

Full Name (Last, First, Middle Initial)

A. UDALL FOR US ALL

Mailing Address 201 Massachusetts Ave NE
Ste C8

City Washington State DC Zip Code 20002-4988

Purpose of Disbursement
Candidate Contribution

Candidate Name
Sen. Tom Udall

Office Sought: House Senate President
 Disbursement For: 2016 Primary General Other (specify) ▼
 State: NM District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : D164659

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1000.00

19500.00
