Image#:	2015080	019000)558802
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08/01/2015 01 : 32

PAGE 1 / 19

FEC FORM 3X	AND DIS	OF RECEI BURSEMEI An Authorized Con	NTS	Office	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT V	Example: over the li	f typing, type nes.	12FE4M5	
	f 				
ADDRESS (number and stree					
Check if different					
than previously reported. (ACC)				NV 89	074
2. FEC IDENTIFICATIO	N NUMBER 🔻	CITY 🔺	5	STATE 🔺	ZIP CODE
C C00554162		3. IS THIS REPORT	NEW (N) OR	AMENDE (A)	ED
 4. TYPE OF REPOR (Choose One) (a) Quarterly Reports: 	(b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)	May 20 (M5) Jun 20 (M6)	Aug 20 (M	(Non-Election Year Only) (Non-Election (Non-Election
_		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M	Year Only) 10) Jan 31 (YE)
April 15 Quarterly Rep July 15	ort (Q1) (c) 12-Day		y (12P)	General (12G)	Runoff (12R)
Quarterly Rep October 15	ort (Q2) Report		ntion (12C)	Special (12S)	
Quarterly Rep January 31 Year-End Rep		Election on	M / D D /	Y Y Y Y Y	in the State of
X July 31 Mid-Ye Report (Non-e Year Only) (M	lection Y) POST-I		al (30G)	Runoff (30R)	Special (30S)
Termination R (TER)		Election on	M / D D /	Y Y Y Y Y	in the State of
5. Covering Period	M M / D D / 01 01	2015 thro	ugh 06	/ D D / Y 30	2015
I certify that I have examin	ed this Report and to th	e best of my knowledge	and belief it is tru	e, correct and com	plete.
Type or Print Name of Trea	asurer Robert Mallory				
Signature of Treasurer	Robert Mallory	[Electr	nically Filed]	Date 07	D D / Y Y Y Y 31 2015
NOTE: Submission of false,	erroneous, or incomplete	information may subject t	e person signing th	nis Report to the per	nalties of 2 U.S.C. §437g.
Office Use Only				FI	EC FORM 3X Rev. 12/2004

iiiia			
Γ	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
٧	Vrite or Type Committee Name		
-	TEA PARTY ARMY		
R	eport Covering the Period: From:	01 01 / Y Y Y Y 01 01 2015	Fo: 06 30 / Y Y Y Y Y 2015
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2015		11.24
	(b) Cash on Hand at Beginning of Reporting Period	11.24	
	(c) Total Receipts (from Line 19)	12635.00	12635.00
	 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	12646.24	12646.24
7.	Total Disbursements (from Line 31)	12606.00	12606.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	40.24	40.24
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	28708.28	

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)

Page 3

Write or Type Committee Name TEA PARTY ARMY

Report Covering the Period: From:	01 2015	To: 06 30 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	25.00	25.00
(i) Itemized (use Schedule A)	25.00	25.00
		40040.00
(ii) Unitemized	12610.00	12610.00
(iii) TOTAL (add	12635.00	12635.00
Lines 11(a)(i) and (ii)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	7 7 7
(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)▶	12635.00	12635.00
. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	
. All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , ,	
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
. Refunds of Contributions Made		
to Federal Candidates and Other	0.00	0.00
Political Committees	0.00	
. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds	0.00	0.00
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
(,		
(b) Levin Funds (from Schedule H5)	0.00	0.00
		7 7 7
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c)) ►	12635.00	12635.00
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	12635.00	12635.00

I

DETAILED SUMMARY PAGE

II. Dishuragmente	COLUMN A	COLUMN B	
II. Disbursements	Total This Period	COLUMN B Calendar Year-to-Date	
. Operating Expenditures: – (a) Allocated Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share	0.00	0.0	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating Expenditures	7713.00	7713.00	
 (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) 	7713.00	7713.00	
. Transfers to Affiliated/Other Party Committees	0.00	0.00	
. Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	
. Independent Expenditures			
(use Schedule E) Coordinated Party Expenditures	4893.00	4893.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
. Loan Repayments Made	0.00	0.00	
 Loans Made Refunds of Contributions To: 	0.00	0.00	
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds	0.00	0.00	
(add Lines 28(a), (b), and (c)) ►			
9. Other Disbursements	0.00	0.00	
 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	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	12606.00	12606.0	
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	12606.00	12606.00	

L

DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	12635.00	12635.00
 Total Contribution Refunds (from Line 28(d)) 	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	12635.00	12635.00
add Line 21(a)(i) and Line 21(b))►	7713.00	7713.00
 Offsets to Operating Expenditures (from Line 15, page 3) 	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	7713.00	7713.00

SCHEDULE A	(FEC	Form	3X)
ITEMIZED REC	EIPTS		

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

19

	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a	ts may not be sold or used by any per and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) TEA PARTY ARMY		
Full Name (Last, First, Middle Initial) L. M. Heinrich Mailing Address PO Box 459 City State Longwood FL	e Zip Code 32752	Date of Receipt
FEC ID number of contributing federal political committee. C Name of Employer Occup None Retired Receipt For: Aggre Other (specify) ▼ C	pation	Amount of Each Receipt this Period 25.00 Contribution
B. Full Name (Last, First, Middle Initial) Mailing Address City State	e Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occup Receipt For: Aggre	pation egate Year-to-Date ▼	Amount of Each Receipt this Period
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)		
C. Mailing Address City State	e Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occup	pation	Amount of Each Receipt this Period
Receipt For: Aggre Primary General Other (specify) ▼	egate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		25.00

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

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SCHEDULE B (FEC Form 3)	()	FOR LINE	NUMBER: PAGE 7 OF 19
ITEMIZED DISBURSEMENTS	Use separate schedule((s) (check only	
	for each category of the Detailed Summary Page		22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports an or for commercial purposes, other than using			
NAME OF COMMITTEE (In Full) TEA PARTY ARMY			
Full Name (Last, First, Middle Initial)			
A. Grassroots Campaign Creati	ons		Date of Disbursement
Mailing Address 2360 Corp Cir No. 400			03 30 2015
City Henderson	StateZip CodeNV89074-7722		Transaction ID : SB21B.4205
Purpose of Disbursement Creative Fees			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1750.00
Office Sought: House E Senate President	Disbursement For: Primary General Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial) B. Grassroots Campaign Creati	ons		Date of Disbursement
Mailing Address 2360 Corp Cir No. 400			03 / D D / Y Y Y Y 03 31 2015
City Henderson	State Zip Code NV 89074-7722		Transaction ID : SB21B.4200
Purpose of Disbursement Credit Card Processing fees			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	281.00
Senate President	bisbursement For: Primary General Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
c. Grassroots Campaign Creation	ons		Date of Disbursement
Mailing Address 2360 Corp Cir No. 400			03 31 2015
City Henderson	State Zip Code NV 89074-7722		Transaction ID : SB21B.4202
Purpose of Disbursement Telephone & Faxing			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1826.00
Senate President	bisbursement For: Primary General Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (or	otional)	•••••	3857.00
TOTAL This Period (last page this line numl	per only)		

SCHEDULE B (FEC Form 3X)			OR LINE NUMBER: PAGE 8 OF 19			
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only				
	for each category of the Detailed Summary Page	× 21b 27	22 23 24 25 26 28a 28b 28c 29 30			
Any information copied from such Reports and or for commercial purposes, other than using th						
NAME OF COMMITTEE (In Full)						
Full Name (Last, First, Middle Initial)						
A. Grassroots Campaign Creation	S		Date of Disbursement			
Mailing Address 2360 Corp Cir No. 400			06 30 2015			
City Henderson	StateZip CodeNV89074-7722		Transaction ID : SB21B.4201			
Purpose of Disbursement Credit Card Processing fees			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	280.00			
Office Sought: House Disl Senate President	ursement For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) B. Grassroots Campaign Creation	S		Date of Disbursement			
Mailing Address 2360 Corp Cir No. 400			06 / D D / Y Y Y Y 2015			
City Henderson	StateZip CodeNV89074-7722		Transaction ID : SB21B.4203			
Purpose of Disbursement Telephone & Faxing			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	1826.00			
Senate President	ursement For: Primary General Other (specify)					
State: District: Full Name (Last, First, Middle Initial)						
c. Grassroots Campaign Creation	S		Date of Disbursement			
Mailing Address 2360 Corp Cir No. 400			06 30 2015			
City Henderson	State Zip Code NV 89074-7722		Transaction ID : SB21B.4206			
Purpose of Disbursement Creative Fees			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	1750.00			
Senate President	ursement For: Primary General Other (specify)					
State: District:						
SUBTOTAL of Disbursements This Page (optic	nal)	••••••	3856.00			
TOTAL This Period (last page this line number	only)	····· ►	7713.00			

SCHEDULE D (FEC Form 3X)			PAGE 9 OF 19	
(0)		(Use separate schedule(s)	FOR LINE NUMBER:	
DEBTS AND OBLIGATIONS		for each	(check only one) 9	
Excluding Loans		numbered line)	X 10	
NAME OF COMMITTEE (In Full) TEA PARTY ARMY				
A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		ebt (Purpose):	
Grassroots Campaign Creation	าร	Design,Pro Messages	duction & Distribution of Advertising	
Mailing Address 2360 Corp Cir No. 400				
City State	Zip Code			
Henderson	NV 89074-7722			
Outstanding Balance Beginning This Period		Transacti	on ID : SD10.4114	
17958.28				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00				
0.00		0.00	17958.28	
B. Full Name (Last, First, Middle Initial) of Debto			ebt (Purpose):	
Grassroots Campaign Creation	S	Creative Ca	ampaign Costs	
Mailing Address 2360 Corp Cir				
No. 400				
City State	Zip Code			
Henderson	NV 89074-7722			
Outstanding Balance Beginning This Period		Transact	ion ID : SD10.4120	
10750.00				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
0.00		0.00	10750.00	
0.00			, , , , , , , , , , , , , , , , , , , ,	
C. Full Name (Last, First, Middle Initial) of Debt	tor or Creditor	Nature of D	ebt (Purpose):	
Mailing Address				
City	State Zip Code			
Outstanding Balance Beginning This Period				
Amount Incurred This Period	Payment This Period	Outstandir	ng Balance at Close of This Period	
1) SUBTOTALS This Period This Page (optional)		►	28708.28	
2) TOTALS This Period (last page this line number	er only)	▶	28708.28	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		0.00	
4) ADD 2) and 3) and carry forward to appropriate	e line of Summary Page (last page o	nly) 🕨	28708.28	

Image# 201508019000558811

ITEMIZED INDEPENDENT EXPENDIT	JRES				PAGE 10 OF 19 FOR LINE 24 OF FORM 3X
				FEC ID	ENTIFICATION NUMBER V
TEA PARTY ARMY				C	C00554162
Check if 24-hour report 48-hour report	ort New rep	ort Amends repo		1 M /	
Full Name of Payee			Date	of Public	Distribution/Dissemination
Grassroots Campaign Creations				02	D D / Y Y Y Y 05 / 2015
Mailing Address 2360 Corp Cir				-	
No. 400			Amou	int	
City	State	Zip Code			43.00
Henderson	NV	89074-7722			: SE.4163 rsement or Obligation
Purpose of Expenditure Email		Category/ Type 004		02 /	05 / 2015
Name of Federal Candidate		Support	Office Sough	nt: 🗡	K House District: 06
RONALD D DESANTIS		Oppose	Presid		Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		43.00	Disbursemer	nt For: Other (spe	Primary General
Full Name of Payee					Distribution/Dissemination
Grassroots Campaign Creation	S		_	M M /	D D / Y Y Y Y
Mailing Address 2360 Corp Cir			- L	02	20 2015
No. 400			Amou	unt	
City	State	Zip Code			209.00
Henderson	NV	89074-7722			: SE.4193 Irsement or Obligation
Purpose of Expenditure Email		Category/ Type 004		^M 02 /	D 20 / Y Y Y Y 2015
Name of Federal Candidate		Support	Office Sougl	nt:	House District:
CHARLES E SENATOR GRASSLEY		Oppose	Presid	lent	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought		209.00	Disbursemer 2016	nt For: Other (sp	Primary General
(a) SUBTOTAL of Itemized Independent Exp.(b) SUBTOTAL of Unitemized Independent E			•		252.00
(c) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the ind with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized				
Robert Mallory	[Electron	ically Filed] Date	07 /	31	2015
Signature					

ITE	EMIZED INDEPENDENT EXPENDITURES		PAGE 11 OF 19 FOR LINE 24 OF FORM 3X
			FEC IDENTIFICATION NUMBER ▼
I	EA PARTY ARMY		C C00554162
Ch	neck if 24-hour report 48-hour report New	report Amends repor	t filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	Grassroots Campaign Creations		M M / D D / Y Y Y Y 03 06 2015
	Mailing Address 2360 Corp Cir		Amount
	No. 400		Amount
	City State	Zip Code	93.00
	Henderson NV	89074-7722	Transaction ID : SE.4175 Date of Disbursement or Obligation
	Purpose of Expenditure Email	Category/ Type 004	03 / D D / Y Y Y Y 06 / 2015
	Name of Federal Candidate	Support	Office Sought: X House District: 17
	TOM MR. ROONEY	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	93.00	Disbursement For: X Primary General 2016 —
			Other (specify) ►
	Full Name of Payee Grassroots Campaign Creations		Date of Public Distribution/Dissemination
	Mailing Address		03 18 2015
	No. 400		Amount
	City State	Zip Code	401.00
	Henderson NV	89074-7722	Transaction ID : SE.4195 Date of Disbursement or Obligation
	Purpose of Expenditure Email	Category/ Type 004	03 / D D / Y Y Y Y 2015
	Name of Federal Candidate	X Support	Office Sought: House District:
	RAFAEL EDWARD TED CRUZ	Oppose	President X Senate State: TX
	Calendar Year-To-Date Per Election for Office Sought	401.00	Disbursement For: X Primary General 2016 Other (specify) ▶
	(a) SUBTOTAL of Itemized Independent Expenditures		494.00
	(b) SUBTOTAL of Unitemized Independent Expenditures		►
	(c) TOTAL Independent Expenditures		
	Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
	Robert Mallory [Elec	ctronically Filed] Date	07 31 2015
	Signature		

ITE	EMIZED INDEPENDENT EXPENI	DITURES				PAGE 12 OF 19 FOR LINE 24 OF FORM 3X
	AME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER V
I	EA PARTY ARMY				С	C00554162
Ch	neck if 24-hour report 48-hour	report New repo	ort Amends repo	ort filed on	M	
	Full Name of Payee			Da	te of Publi	c Distribution/Dissemination
	Grassroots Campaign Creation	S			03	/ D D / Y Y Y Y 20 2015
	Mailing Address 2360 Corp Cir			Δn	nount	
	No. 400				lount	
	City	State	Zip Code			328.00
	Henderson	NV	89074-7722			D: SE.4161 ursement or Obligation
	Purpose of Expenditure Email		Category/ Type 004		03	/ D D / Y Y Y Y 20 / 2015
	Name of Federal Candidate		Support	Office So	ught:	K House District: 07
	MARSHA MRS. BLACKBURN		Oppose	Pre	sident	Senate State: <u>TN</u>
	Calendar Year-To-Date		328.00	Disbursen	nent For:	X Primary General
	Per Election for Office Sought		320.00	2010	Other (sp	pecify) ►
	Full Name of Payee Grassroots Campaign Creat	tions		Da	ate of Publi	ic Distribution/Dissemination
		.10115			03	/ D D / Y Y Y Y 23 2015
	Mailing Address 2360 Corp Cir			An	nount	
	No. 400					
	City Henderson	State NV	Zip Code 89074-7722			111.00 D : SE.4177
	Purpose of Expenditure		Category/	Da	ate of Disb	ursement or Obligation
	Email		Type 004		03	23 2015
	Name of Federal Candidate		X Support	Office So	ught:	K House District: 05
	F. JAMES JR. SENSENBRENNER		Oppose	Pre	sident	Senate State: WI
	Calendar Year-To-Date Per Election for Office Sought		111.00	Disburser 2016	г	Primary General
					Other (sp	pecify) ►
	(a) SUBTOTAL of Itemized Independent	Expenditures		• •		439.00
	(b) SUBTOTAL of Unitemized Independe	ent Expenditures				
	(a) TOTAL Independent Expenditures					
	(c) TOTAL Independent Expenditures			·· •		
	Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized				
	Robert Mallory	[Electron	ically Filed]	07	/ 31	2015
	Signature	.	_ Date	; ,		

ITEMIZED	INDEPENDENT EXPEND	DITURES				PAGE 13 FOR LINE 2	OF 19 4 OF FORM 3X
	COMMITTEE (In Full)				FEC ID	DENTIFICATIO	N NUMBER 🔻
IEA PA	RTY ARMY				С	C00554162	
					л м /		Y Y Y Y
Check if	24-hour report 48-hour	report New repo	ort Amends repo				
	ne of Payee			Date	of Public	c Distribution/I	Dissemination
Grass	roots Campaign Creations	3		- P	03	27 ^D	2015
Mailing /	Address 2360 Corp Cir			Amou	int		
	No. 400			7 41100			
City		State	Zip Code				89.00
Henders		NV	89074-7722): SE.4197 ursement or C	bligation
Purpose Email	of Expenditure		Category/ Type 004		03	27 /	Y Y Y Y 2015
Name of	f Federal Candidate		Support	Office Sougl	nt:	House	District:
MICHAE	EL D CRAPO		Oppose	Presid		K Senate	State: ID
	endar Year-To-Date		80.00	Disbursemer 2016	nt For:	X Primary	General
Per	Election for Office Sought		89.00		Other (sp	ecify) ►	
	^{ne of Payee} sroots Campaign Creati	ons		Date	of Publi	c Distribution/	Dissemination
		0115			03	30	2015
Mailing	Address 2360 Corp Cir			Amo	unt		
	No. 400			_			
City		State NV	Zip Code	Trans	action IF	D : SE.4189	332.00
Hender		INV	89074-7722			ursement or C	Obligation
Email	of Expenditure		Category/ Type 004		03	30	2015
Name o	f Federal Candidate		X Support	Office Soug	ht:	House	District:
MIKE L	EE		Oppose	Presic	lent	X Senate	State: UT
	endar Year-To-Date		332.00	Disburseme	nt For:	X Primary	General
Per	r Election for Office Sought				Other (sp	pecify) ►	
	COTAL of Itomized Independent	Evenendituree					424.00
(a) 506	TOTAL of Itemized Independent	Experialitures		• •	-7-		421.00
(b) SUB1	TOTAL of Unitemized Independe	nt Expenditures		•			
					-7-		
(c) TOTA	L Independent Expenditures			•	-7-		
with, or a	nalty of perjury I certify that the t the request or suggestion of, a nmittee) any political party comm	any candidate or authorized					
	Robert Mallory	[Electroni	ically Filed] Date	07 ^M	31	/ Y Y 201	у у 5
Signat	ure				<u> </u>		

ITE	MIZED INDEPENDENT EXPENDITI	JRES				PAGE 14	OF 19 4 OF FORM 3X
NA	ME OF COMMITTEE (In Full)				FEC I		N NUMBER V
Т	EA PARTY ARMY				С	C00554162	
Ch	eck if 24-hour report 48-hour report	ort New repo	ort Amends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y Y
	Full Name of Payee			Da	te of Publi	ic Distribution/I	Dissemination
	Grassroots Campaign Creations				^M 03	/ D D / 31	2015
	Mailing Address 2360 Corp Cir			Am	nount		
	No. 400						
	City	State	Zip Code				178.00
	Henderson	NV	89074-7722			D:SE.4187 ursement or O	bligation
	Purpose of Expenditure Email		Category/ Type 004		03	/ D D / 31	2015
	Name of Federal Candidate		Support	Office So	ught:	House [District:
	RAND PAUL		Oppose	Pre	sident	X Senate	State: KY
	Calendar Year-To-Date		178.00	Disbursen 2016	nent For:	X Primary	General
	Per Election for Office Sought	· · · · · · · · · · · · · · · · · · ·	178.00	2010	Other (s	pecify) 🕨	
	Full Name of Payee Grassroots Campaign Creation	6		Da	te of Publ	lic Distribution/	Dissemination
		>			04	/ D D / 06 /	2015 Y
	Mailing Address 2360 Corp Cir			An	nount		
	No. 400						
	City Henderson	State NV	Zip Code 89074-7722			D : SE.4173	15.00
	Purpose of Expenditure		Cotosonul	Da		oursement or C	
	Email		Category/ Type 004		04	06	2015
	Name of Federal Candidate		X Support	Office So	ught:	X House	District: 10
	THOMAS ANTHONY MARINO		Oppose	Pre	sident	Senate	State: PA
	Calendar Year-To-Date		15.00	Disburser 2016	nent For:	X Primary	General
ᆜ	Per Election for Office Sought		10.00		Other (s	pecify) ►	
	(a) SUBTOTAL of Itemized Independent Exp	enditures		• •	-7-	-7-	193.00
	(b) SUBTOTAL of Unitemized Independent E	xpenditures					· · · · · ·
				· _			
	(c) TOTAL Independent Expenditures			•• •			
١	Under penalty of perjury I certify that the inc with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized					
	Robert Mallory	[Electron	ically Filed] Date	07 ^M	/ 31	2015	
	Signature						

ITEMIZED INDEPENDENT EXPENDITURES		PAGE 15 OF 19 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
TEA PARTY ARMY		C C00554162
		M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report New rep	ort Amends report fil	ed on
Full Name of Payee		Date of Public Distribution/Dissemination
Grassroots Campaign Creations		04 / D D / Y Y Y Y 2015
Mailing Address 2360 Corp Cir		Amount
No. 400		
City State	Zip Code	331.00
Henderson NV	89074-7722	Transaction ID : SE.4179 Date of Disbursement or Obligation
Purpose of Expenditure Email	Category/ Type 004	M M M / D D / Y Y Y Y 04 14 2015
Name of Federal Candidate	Support Off	fice Sought: X House District: 03
THEODORE SCOTT YOHO	Oppose	President Senate State:
Calendar Year-To-Date	331.00 Dis	sbursement For: X Primary General
Per Election for Office Sought	331.00	Other (specify)
Full Name of Payee		Date of Public Distribution/Dissemination
Grassroots Campaign Creations		04 23 2015
Mailing Address 2360 Corp Cir		Amount
No. 400		
City State	Zip Code	617.00
Henderson NV	89074-7722	Transaction ID : SE.4172 Date of Disbursement or Obligation
Purpose of Expenditure Email	Category/ Type 004	M 04 / D D / Y Y Y Y 23 / 2015
Name of Federal Candidate	Support Of	fice Sought: X House District: 03
WALTER B. JONES	Oppose	President Senate State: NC
Calendar Year-To-Date		sbursement For: X Primary General
Per Election for Office Sought		Other (specify) ►
/ · · · · · · · · · · · · · ·		
(a) SUBTOTAL of Itemized Independent Expenditures	▶	948.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Robert Mallory [Electron]	ically Filed] Date	07 31 2015
Signature	Dale	

ITE	EMIZED INDEPENDENT EXPEND	ITURES				PAGE 16	OF 19 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I		ON NUMBER V
T	EA PARTY ARMY				С	C00554162	· · · · · ·
Ch	neck if 24-hour report 48-hour re	eport New repo	ort Amends repo	ort filed on	M		Y Y Y Y Y
	Full Name of Payee Grassroots Campaign Creations			Date	e of Publ	lic Distribution	Dissemination
					05	/ 06 /	2015 Y
	Mailing Address 2360 Corp Cir			Amo	ount		
	No. 400						
	City	State NV	Zip Code 89074-7722	Trong	,	D : SE.4169	60.00
	Henderson		69074-7722			bursement or (Obligation
	Purpose of Expenditure Email		Category/ Type 004		^M 05	/ D D /	2015 Y
	Name of Federal Candidate		Support	Office Sou	ght:	X House	District: 09
	ALAN MARK GRAYSON		X Oppose	Pres	ident	Senate	State:FL
	Calendar Year-To-Date		60.00	Disbursem	ent For:	X Primary	General
	Per Election for Office Sought	, , ,	80.00	2010	Other (s	specify) ►	
	Full Name of Payee Grassroots Campaign Creation	ne		Dat	e of Pub	lic Distribution	/Dissemination
					^M 05	/ D D / 15	2015
	Mailing Address 2360 Corp Cir			Am	ount		
	No. 400						
	City Henderson	State NV	Zip Code 89074-7722			D : SE.4181	31.00 Obligation
	Purpose of Expenditure Email		Category/ Type 004		^M 05	/ 1 5 /	2015
	Name of Federal Candidate		Support	Office Sou	ght:	House	District:
	DAVID B VITTER		Oppose		-	X Senate	State: LA
	Calendar Year-To-Date Per Election for Office Sought		31.00	Disbursem 2016		Primary	/ General
		7 7			Other (s	specify) ►	
	(a) SUBTOTAL of Itemized Independent E	xpenditures		• •	-7		91.00
	(b) SUBTOTAL of Unitemized Independen	t Expenditures		••			
	(c) TOTAL Independent Expenditures						
	Under penalty of perjury I certify that the with, or at the request or suggestion of, ar party committee) any political party commi	ny candidate or authorized					
	Robert Mallory	[Electron	ically Filed] Date	07	/ 31	201	
	Signature					-	

ITE	MIZED INDEPENDENT EXPENDITURE	ES				PAGE 17 OF 19 FOR LINE 24 OF FORM 3	x
NA	ME OF COMMITTEE (In Full)				FEC II		
Т	EA PARTY ARMY					C00554162	1
							-
Ch	eck if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or			
	Full Name of Payee			C	Date of Publi	c Distribution/Dissemination	
	Grassroots Campaign Creations				05	/ D D / Y Y Y Y 21 2015	1
	Mailing Address 2360 Corp Cir			Δ	mount		
	No. 400						÷.
	City	State	Zip Code			44.00	
	Henderson	NV	89074-7722		ansaction II Date of Disb	U: SE.4185 ursement or Obligation	
	Purpose of Expenditure Email		Category/ Type 004		05	/ D D / Y Y Y Y 21 / 2015]
	Name of Federal Candidate		Support	Office S	ought:	House District:	_
	ROB PORTMAN		Oppose	Pi	resident	X Senate State: OH	_
	Calendar Year-To-Date		44.00	Disburse 2016	ement For:	Primary Genera	I
	Per Election for Office Sought	, , ,	44.00	2010	Other (sp	pecify) ►	_
	Full Name of Payee Grassroots Campaign Creations			[Date of Publ	ic Distribution/Dissemination	
					05	/ D D / Y Y Y Y 28 2015	1
	Mailing Address 2360 Corp Cir			A	Amount		1
	No. 400						÷,
	City Henderson	State NV	Zip Code 89074-7722	Tr	ansaction I	384.00 D : SE.4167	4
	Purpose of Expenditure					ursement or Obligation	
	Email		Category/ Type 004		05	28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	Name of Federal Candidate		X Support	Office S	Sought:	K House District: 04	_
	TREY GOWDY		Oppose	P	resident	Senate State: SC	
	Calendar Year-To-Date		384.00	Disburse 2016	ement For:	Primary Genera	ıl
	Per Election for Office Sought		004.00		Other (s	pecify) ►	_
	(a) SUBTOTAL of Itemized Independent Expendi	tures				428.00	1
	(b) SUBTOTAL of Unitemized Independent Experience	nditures		• •			
	(c) TOTAL Independent Expenditures			- F			T.
				•			4
	Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized					
	Robert Mallory	[Electron	ically Filed] Date	07	/ D D 31	/ Y Y Y Y 2015	
	Signature					4 [

ITEN	MIZED INDEPENDENT EXPENDITURES		PAGE 18 OF 19 FOR LINE 24 OF FORM 3X
	1E OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER V
	A PARTY ARMY		C C00554162
Cheo	ck if 24-hour report 48-hour report New report	ort Amends report	
	Full Name of Payee		Date of Public Distribution/Dissemination
	Grassroots Campaign Creations		05 29 2015
	Mailing Address 2360 Corp Cir		Amount
	No. 400		
(City State	Zip Code	230.00
	Henderson NV	89074-7722	Transaction ID : SE.4191 Date of Disbursement or Obligation
	Purpose of Expenditure Email	Category/ Type 004	M 05 / D D / Y Y Y Y 29 / 2015
Ē	Name of Federal Candidate	Support	Office Sought: House District:
	JAMES M SEN INHOFE	Oppose	President X Senate State:
	Calendar Year-To-Date		Disbursement For: X Primary General
L	Per Election for Office Sought	230.00	Other (specify) ►
	Full Name of Payee Grassroots Campaign Creations		Date of Public Distribution/Dissemination
			06 08 2015
	Mailing Address 2360 Corp Cir		Amount
	No. 400		
	City State Henderson NV	Zip Code 89074-7722	240.00 Transaction ID : SE.4165
	Purpose of Expenditure		Date of Disbursement or Obligation
	Email	Category/ Type 004	06 / ^D 08 / ^Y 2015
	Name of Federal Candidate	X Support	Office Sought: X House District: 01
	LOUIS B. MR. JR. GOHMERT	Oppose	President Senate State:
	Calendar Year-To-Date Per Election for Office Sought	240.00	Disbursement For: X Primary General 2016
			Other (specify)
(2	a) SUBTOTAL of Itemized Independent Expenditures		470.00
(-	,,		
(k	b) SUBTOTAL of Uniternized Independent Expenditures		►
(0	c) TOTAL Independent Expenditures		•
w	nder penalty of perjury I certify that the independent expenditures ith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.		
	Robert Mallory [Electron	ically Filed]	07 31 2015
	Signature	Date	

ITE	Emized independent expendi	TURES				PAGE 19 OF 19 FOR LINE 24 OF FORM 3X
	ME OF COMMITTEE (In Full)				FEC I	DENTIFICATION NUMBER V
Т	EA PARTY ARMY				С	C00554162
Ch	neck if 24-hour report 48-hour re	eport New rep	ort Amends repo	ort filed on	M = M	
	Full Name of Payee Grassroots Campaign Creations			Dat	e of Publ	ic Distribution/Dissemination
	Grassiools Campaign Creations				^M 06	/ D D / Y Y Y Y 11 2015
	Mailing Address 2360 Corp Cir			Am	ount	
	No. 400					
	City	State	Zip Code		,	1157.00
	Henderson	NV	89074-7722			D: SE.4183 pursement or Obligation
	Purpose of Expenditure Email		Category/ Type 004		06	/ D D / Y Y Y Y 11 2015
	Name of Federal Candidate		Support	Office Sou	ght:	House District:
	JEFFERSON B SESSIONS		Oppose	Pres	ident	X Senate State: <u>AL</u>
	Calendar Year-To-Date		1157.00	Disbursem	ent For:	Primary General
	Per Election for Office Sought		1157.00	2016	Other (s	pecify) ►
	Full Name of Payee			Dat	e of Pub	lic Distribution/Dissemination
					M M	/ D D / Y Y Y Y
	Mailing Address			٨٣	ount	
				A	ount	
	City	State	Zip Code			n - 1 - 19 1 - 19 1
				Dat	e of Disk	pursement or Obligation
	Purpose of Expenditure		Category/ Type		M = M	
	Name of Federal Candidate		Support	Office Sou	ight:	House District:
			Oppose	Pres	sident	Senate State:
	Calendar Year-To-Date			Disbursem	ent For:	Primary General
	Per Election for Office Sought				Other (s	specify) ►
	(a) SUBTOTAL of Itemized Independent Ex	xpenditures		•		1157.00
	(b) SUBTOTAL of Uniternized Independent	Expenditures		•• ▶		
	(c) TOTAL Independent Expenditures			•••		4893.00
	Under penalty of perjury I certify that the i with, or at the request or suggestion of, an party committee) any political party committ	y candidate or authorized				
	Robert Mallory	[Electron	ically Filed] Date	e 07	/ 31	2015
	Signature					