PAGE 1 / 8

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3X | For Other Than | An Authorized C | ommittee | Off | ice Use Only |
|---|---|-------------------------|--|-----------------------|--|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT | Examp | le: If typing, type e lines. | 12FE4M5 | |
| CropLife America PC | DLITICAL ACTIO | ON COMMITTE | E | | |
| | | | | | |
| ADDRESS (number and street) | 1156 15TH STRE | EET NW SUITE 400 | | | |
| Check if different than previously reported. (ACC) | WASHINGTON | | | DC 2 | 20005 |
| 2. FEC IDENTIFICATION | NUMBER ▼ | CITY A | | STATE A | ZIP CODE ▲ |
| C C00248849 | | 3. IS THIS REPORT | × NEW (N) OR | AMENI (A) | DED |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report July 31 Mid-Year Report (Non-elec Year Only) (MY) Termination Report (TER) | (Q2) PRE-E Report (Q3) (YE) (d) 30-Day POST- Report | lection for the: Co | May 20 (M5 Jun 20 (M6) Jul 20 (M7) mary (12P) nvention (12C) mary (30G) | | M9) M9) Dec 20 (M12) (Non-Election Year Only) M10) Jan 31 (YE) Runoff (12R) |
| ů . | 11 01 | | through 11 | / D D / Y | 2017 |
| I certify that I have examined Type or Print Name of Treasu | Vroom, Jay, , , | ne best of my knowled | dge and belief it is t | rue, correct and co | mplete. |
| Signature of Treasurer | oom, Jay, , , | [El | ectronically Filed] | Date 12 | 15 / 2017 |
| NOTE: Submission of false, erro | oneous, or incomplete | information may subject | ct the person signing | this Report to the pe | enalties of 52 U.S.C. § 30109 |
| Office Use Only | | | | F | 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

CropLife America POLITICAL ACTION COMMITTEE

11 01 2017 11 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 146862.60 January 1. 2017 (b) Cash on Hand at 122325.60 Beginning of Reporting Period..... 4850.00 117364.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 264226.60 127175.60 6(a) and 6(c) for Column B)..... 2500.00 139551.00 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 124675.60 124675.60 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

CropLife America POLITICAL ACTION COMMITTEE

01 2017 11 30 2017 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 4850.00 99490.00 (i) Itemized (use Schedule A)..... 0.00 10874.00 (ii) Unitemized (iii) TOTAL (add 110364.00 4850.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 7000.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 117364.00 4850.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))....... 4850.00 117364.00 20. Total Federal Receipts 4850.00 117364.00 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|--|---|-----------------------------------|--|--|
| Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | 100 100 100 100 100 100 100 100 100 100 | | | |
| (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 | 0.00 | 0.00 | | |
| (add 21(a)(i), (a)(ii), and (b)) | | | | |
| Committees Contributions to Federal Candidates/Committees | 0.00 | 0.00 | | |
| and Other Political Committees Independent Expenditures | 2500.00 | 139500.00 | | |
| (use Schedule E) | 0.00 | 0.00 | | |
| (52 U.S.C. § 30116(d)) (use Schedule F) | 0.00 | 0.00 | | |
| 6. Loan Repayments Made | 0.00 | 0.00 | | |
| Loans Made | 0.00 | 0.00 | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 51.00 | | |
| (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 | 51.00 | | |
| Other Disbursements (Including | 4 4 | 4 4 | | |
| Non-Federal Donations) | 0.00 | 0.00 | | |
| Federal Election Activity (52 U.S.C. § 30101((a) Allocated Federal Election Activity (from Schedule H6) | 20)) | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) "Levin" Share(b) Federal Election Activity Paid | 0.00 | 0.00 | | |
| 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)) | 2500.00 | 139551.00 | | |
| . Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) | | | | |
| from Line 31) | 2500.00 | 139551.00 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 4850.00 | 117364.00 | | | |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 51.00 | | | |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 4850.00 | 117313.00 | | | |
| 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

| | | FOR LINE NUMBER: | | | PAGE | 6 | OF | 8 | | |
|------------------|--|------------------|-----|--|------|---|-----|----|---|----|
| (check only one) | | | | | | | | | | |
| | | × | 11a | | 11b | | 11c | 12 | 2 | |
| | | | 13 | | 14 | | 15 | 16 | 6 | 17 |

Detailed Summary Page 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) CropLife America POLITICAL ACTION COMMITTEE Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Whitman, Shawn, , , Date of Receipt Mailing Address 3524 Saylor Place 2017 City Zip Code State Transaction ID: A95F9607ECCF84E95862 VA Alexandria 22304-1831 Amount of Each Receipt this Period FEC ID number of contributing C 210.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **VP Government Affairs Fmc Corporation** Receipt For: Aggregate Year-to-Date ▼ Primary General 210.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. McClelland, Robert, , , Date of Receipt Mailing Address 1229 Berkeley Ct 2017 11 City State Zip Code Transaction ID: A2BE7B4B8681747B7A94 OH Powell 43065-7809 Amount of Each Receipt this Period FEC ID number of contributing 525.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **FLM Harvest** President & Ceo Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1175.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Allemang, Diane, , , Date of Receipt Mailing Address 1615 N Cleveland Street 2017 City State Zip Code Transaction ID: A25A0F41A215C469FB67 VAArlington 22201-3935 Amount of Each Receipt this Period FEC ID number of contributing C 115.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution **Fmc Corporation Executive Vice President North America** Receipt For: Aggregate Year-to-Date ▼ Primary General 1880.00 Other (specify) 850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

7

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

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

| F | OR | LINE | NU | MBER | PAGE | | 7 | OF | 8 | |
|------------------|----|------|----|------|------|-----|---|----|---|----|
| (check only one) | | | | | | | | | | |
| | X | 11a | | 11b | | 11c | | 12 | 2 | |
| | | 13 | | 14 | | 15 | | 16 | 6 | 17 |

| Any information copied from such Reports and sor for commercial purposes, other than using the | Statements may not be sold or used by any pe e name and address of any political committee | erson for the purpose of soliciting contributions to solicit contributions from such committee. | | | |
|--|---|---|--|--|--|
| NAME OF COMMITTEE (In Full) CropLife America POLITICAL A | | | | | |
| Full Name of Individual (Last, First, Middle In Johnson, Glen, , , Mailing Address 1213 Oella Ave | nitial) or Full Organization Name | Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y | | | |
| City | State Zip Code | Transaction ID : AA8C372ABD4984FA686A | | | |
| Ellicott City | MD 21043-4979 | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | 4000.00 | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | |
| Kocide | President/ceo | Contribution | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 4000.00 | | | | |
| Full Name of Individual (Last, First, Middle In Mailing Address | nitial) or Full Organization Name | Date of Receipt | | | |
| | | M = M / D = D / Y = Y = Y | | | |
| City | State Zip Code | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ | | | | |
| Full Name of Individual (Last, First, Middle In | nitial) or Full Organization Name | Date of Receipt | | | |
| Mailing Address | | M = M / D = D / Y = Y = Y | | | |
| City | State Zip Code | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | | | | |
| Name of Employer (for Individual) | Occupation (for Individual) | Memo Item | | | |
| Receipt For: Primary General Other (specify) | Aggregate Year-to-Date ▼ | | | | |
| SUBTOTAL of Receipts This Page (optional) | | 4000.00 | | | |
| TOTAL This Period (last page this line number | · only) | 4850.00 | | | |

ľ

| City Tampa Purpose of Disbursement Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: | SCHEDULE B (FEC Form 3X) | | | FOR LINE N | | | | |
|---|---|---------------------|---|------------|---|--|--|--|
| NAME OF COMMITTEE (In Full) CropLife America POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) APAR Roberts Victory Committee, The Mailing Address 610 S. Boulevard City Tampa Purpose of Disbursement Contribution Candidate Name President State Primary Office Sought: City State Primary Office Sought: City State Primary Office Sought: City State Primary Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Disbursement Contribution Candidate Name President City State Disbursement Contribution Category/ Type Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name Category/ Type Office Sought: Memo Item Memo Item Memo Item Memo Item | ITEMIZED DISBURSEMENTS | for each o | category of the | 21b | 22 🗶 23 🔲 26 🔲 27 | | | |
| NAME OF COMMITTEE (in Full) CropLife America POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) B. Mailing Address City Purpose of Disbursement Candidate Name City State Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City Purpose of Disbursement Candidate Name City State Disbursement Candidate Name City Category/ Type Date of Disbursement Candidate Name City Category/ Type Date of Disbursement Candidate Name City Category/ Type Disbursement Candidate Name Candidate Name Disbursement Candidate | | | | | | | | |
| CropLife America POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) A. Pat Roberts Victory Committee, The Mailing Address 610 S. Boulevard City Tampa Purpose of Disbursement Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: House President Victory Committee, The Sanate Primary General Primary General Primary General Primary General Primary General Primary General Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Purpose of Disbursement Candidate Name Disbursement Candi | | | | | | | | |
| A Pat Roberts Victory Committee, The Mailing Address 610 S. Boulevard City Tampa Purposa of Disbursement Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: Full Name (Last, First, Middle Initial) State: City State Senate President Candidate Name City State Disbursement Candidate Name Office Sought: House Disbursement Candidate Name City State Disbursement Candidate Name Office Sought: House Disbursement Candidate Name City State Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Disbursement For: Senate President Disbursement For: Senate Primary General President Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name City State Disbursement Candidate Name City State Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Mailing Address City State Disbursement Candidate Name City Mailing Address City Mailing Address City State Disbursement Candidate Name City Purpose of Disbursement Candidate Name City Mamount of Each Disbursement Candidate Name City Mamount of Each Disbursement Candidate Name City Mamount of Each Disbursement City Mamount of Each Disbursement City Category/ Type Office Sought: Mamount of Each Disbursement City Mamount of Each Disbursement City Category/ Type Office Sought: Mamount of Each Disbursement City Category/ Type City Mamount of Each Disbursement City Category/ Type City Mamount of Each Disbursement City Category/ Type City Mamount of Each Disbursement Category/ Type City Mamount of Ea | CropLife America POLITICAL ACT | ION COI | MMITTEE | | | | | |
| Mailing Address 610 S. Boulevard | _ | 0 | | | Date of Disbursement | | | |
| City Tampa | | E | | | | | | |
| Tampa Purpose of Disbursement Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: | Mailing Address 610 S. Boulevard | | | | 11 17 2017 | | | |
| Purpose of Disbursement Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: House Senate Primary General Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: 2017 Category/ Type Office Sought: State Zip Code Purpose of Disbursement Candidate Name Category/ Type Category/ Type Other (specify) Date of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Purpose of Disbursement Candidate Name Category/ Type Tech Identification Number Tech Identification Number Category/ Type Tech Identification Number Tech Identi | | | | | FEC Identification Number | | | |
| Contribution Candidate Name Pat Roberts Victory Committee, The Office Sought: House Senate Primary General Primary General President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Primary General Primary General Other (specify) Type Office Sought: House Disbursement For: Senate President Other (specify) Mailing Address City State Zip Code FEC Identification Number Category/ Type Type Amount of Each Disbursement Date of Disbursement Category/ Type Type Type Amount of Each Disbursement Category/ Type Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Type Transaction ID: 8836D3 Amount of Each Disbursement Transaction ID: 8836D3 Amount of Each Disbursement Transaction ID: 8836D3 Amount of Each Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Memo Item | | | 33606 | | C C00461095 | | | |
| Candidate Name Pat Roberts Victory Committee, The Office Sought: House Senate President X Other (specify) ▼ Mailing Address City State Disbursement For: Category/ Type Office Sought: House Primary General Disbursement Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type Memo Item Date of Disbursement Category/ Type FEC Identification Number Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type Date of Disbursement Category/ Type FEC Identification Number Category/ Type Category/ Type Amount of Each Disbursement Category/ Type FEC Identification Number Category/ Type Category/ Type Office Sought: House Disbursement For: General Other (specify) ▼ FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: House Disbursement For: General Other (specify) ▼ Memo Item Mailing Address City State Zip Code FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: House Disbursement For: General Other (specify) ▼ | Contribution | | | : : | Transaction ID : B836D5580EI | | | |
| Office Sought: | | _ | _ | | Amount of Each Disbursement this Period | | | |
| Senate | | | 017 | Туре | 2500.00 | | | |
| State: District: Other Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Primary General Primary General Disbursement City State Zip Code Prosident State: District: Full Name (Last, First, Middle Initial) Candidate Name City State Zip Code Purpose of Disbursement For: Category/ Type Memo Item FEC Identification Number Category/ Type Date of Disbursement Category/ Type Test Identification Number Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item | | | | | 7 7 | | | |
| B. Date of Disbursement | | Other (speci | | | Memo Item | | | |
| Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Mailing Address City State Zip Code FEC Identification Number Category/ Type Memo Item Date of Disbursement Candidate Name Category/ Type Memo Item Tell Name (Last, First, Middle Initial) Candidate Name City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Disbursement For: Senate Primary General Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item | | | Other | | _ | | | |
| City State Zip Code Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General President State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Purpose of Disbursement Candidate Name Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item | , | | | | Date of Disbursement | | | |
| City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item Category/ Type Disbursement For: State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item | | | | | M = M / D = D / Y = Y = Y | | | |
| Purpose of Disbursement Candidate Name Office Sought: House Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: United State Disbursement Candidate Name Office Sought: Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item Mailing Address Mailing Address City State Zip Code FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Memo Item | Mailing Address | | | | | | | |
| Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Type Category/ Type Category/ Type Category/ Type Category/ Type Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Memo Item | City | State | Zip Code | | FEC Identification Number | | | |
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| State: District: Other (specify) Full Name (Last, First, Middle Initial) City Purpose of Disbursement Candidate Name Office Sought: House Senate President President Other (specify) Memo Item | Office Sought: House Disbursem | | | | - | | | |
| State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name Candidate Name Candidate Name Disbursement For: Senate Primary Other (specify) Memo Item Memo Item Date of Disbursement FEC Identification Number Category/ Type Memo Item Memo Item Memo Item Memo Item Memo Item | | • | | | 4 4 4 | | | |
| Full Name (Last, First, Middle Initial) Date of Disbursement Mailing Address City Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary Primary General President Other (specify) Memo Item | | Other (speci | ify) | | Memo Item | | | |
| Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Memo Item | Full Name (Last, First, Middle Initial) | | | | Date of Dishursoment | | | |
| City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Memo Item | J. | | | | | | | |
| Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary Other (specify) Memo Item | Mailing Address | | | | | | | |
| Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Memo Item | City | City State Zip Code | | | | | | |
| Office Sought: House Disbursement For: Primary General President Other (specify) ▼ Memo Item | Purpose of Disbursement | | С | | | | | |
| Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Memo Item | Candidate Name | | Amount of Each Disbursement this Period | | | | | |
| President Other (specify) ▼ Memo Item | Office Sought: House Disbursem | | | | | | | |
| Memo Item | | - | | | | | | |
| | | Other (speci | ıfy) ▼ | | Memo Item | | | |
| | 2.5 | | | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | SUBTOTAL of Disbursements This Page (optional) | | | | 2500.00 | | | |
| TOTAL This Period (last page this line number only) | TOTAL This Poyled (last need this line number and) | | | | 2500.00 | | | |