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Image# 201701299041535810

**FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

	For Other Than An Aut	norized Committee	Office Use Only
NAME OF     COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
AG AMERICA			
ADDRESS (number and street)	PO Box 3479		
Check if different			
than previously reported. (ACC)	Glen Allen		VA 23058 - L L L L L L L L L L L L L L L L L L
2. FEC IDENTIFICATION NU	JMBER ▼ CIT	ТҮ▲	STATE ▲ ZIP CODE ▲
C C00567560		S THIS REPORT (N) O	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	0 20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	r 20 (M3) Jun 20 (M	Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7	Oct 20 (M10)
Quarterly Report (C July 15	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (C	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (C	13)	M = M / D = D	/ Y Y Y Y in the
Year-End Report (Y	/E) Election	on on	State of
July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		on on	in the State of
5. Covering Period 11	29 / 2016	through 12	M / D D / Y D Y D Y D Y D Y D Y D Y D Y D
I certify that I have examined th	is Report and to the best of	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Sechrist, Erica, Ann, ,		
Signature of Treasurer Sechi	rist, Erica, Ann, ,	[Electronically Filed]	Date 01 / 29 / 2017
NOTE: Submission of false, erron	eous, or incomplete informatio	on may subject the person signin	g this Report to the penalties of 52 U.S.C. § 3010
Office			FEC FORM 3X
Use Only			Rev. 05/2016

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name AG AMERICA 11 29 2016 12 31 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 1163.37 January 1, 2016 (b) Cash on Hand at 37654.79 Beginning of Reporting Period..... 5000.00 414813.35 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 415976.72 42654.79 6(a) and 6(c) for Column B)..... 40769.01 414090.94 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 1885.78 1885.78 (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 27163.53 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

#### AG AMERICA

Report Covering the Period: From:	29 / 2016 To:	12 31 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:	1	
(a) Individuals/Persons Other		
Than Political Committees  (i) Itemized (use Schedule A)	0.00	0.00
(i) itemized (use Schedule A)	4 4	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	4 4	
Lines 11(a)(i) and (ii)▶	0.00	0.00
_		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	2.22
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	0.00	0.00
Totals to Line 33, page 5)	0.00	0.00
Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	5.00
B. All Loans Received	0.00	0.00
7 III Edulid Flocolydd IIIIIII III III III III III III III	4 4	4 4
L Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	5.00	7 7
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	4 4	4 4
to Federal Candidates and Other		
Political Committees	0.00	0.00
. Other Federal Receipts		
(Dividends, Interest, etc.)	5000.00	414813.35
. Transfers from Non-Federal and Levin Funds	7 7	
(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
(c) Total Transfers (add 18(a) and 18(b))	0.00	
. Total Receipts (add Lines 11(d),	5000.00	44,4040
12, 13, 14, 15, 16, 17, and 18(c))▶	5000.00	414813.35
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	5000.00	414813.35
(Subtract Line 10(c) from Line 13)	7 7	71-010.00

#### **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		
<ol> <li>Operating Expenditures:         <ul> <li>(a) Allocated Federal/Non-Federal</li> <li>Activity (from Schedule H4)</li> </ul> </li> </ol>		Calculation to puto		
(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  3. Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees  4. Independent Expenditures	0.00	0.00		
(use Schedule E)5. Coordinated Party Expenditures	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		
7. Loans Made	0.00	0.00		
(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		
Other Disbursements (Including Non-Federal Donations)	40769.01	414090.94		
<ul> <li>Federal Election Activity (52 U.S.C. § 30101(20</li> <li>(a) Allocated Federal Election Activity</li> <li>(from Schedule H6)</li> </ul>	)))			
(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		
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))	40769.01	414090.94		
<ol> <li>Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)</li> </ol>				
from Line 31)	40769.01	414090.94		

#### **DETAILED SUMMARY PAGE**

of Disbursements

	0.011111111.4	
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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
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
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

### S 17

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 18 (check only one)  11a 11b 11c 12 13 14 15 16 🗶 17		
				nerson for the purpose of soliciting contributions e to solicit contributions from such committee.	
	OF COMMITTEE (In Full) MERICA				
	ne of Individual (Last, First, Middle Initia can Gas Association	al) or Full O	rganization Name	Date of Receipt	
Mailing A	Address 400 North Capitol Street, NW			12 13 2016	
City Washing	gton	State DC	Zip Code 20001	Transaction ID : SA17.4715  Amount of Each Receipt this Period	
	number of contributing political committee.	С		5000.00	
Name of	Employer (for Individual)	Occi	upation (for Individual)	Memo Item Non-Contribution Account	
	For: mary General her (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00		
В	ne of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt	
Mailing A	Address			M = M / D = D / Y = Y = Y	
City		State	Zip Code	Amount of Each Receipt this Period	
	number of contributing political committee.	C			
Name of	Employer (for Individual)	Occ	upation (for Individual)	Memo Item	
	For: mary General her (specify) ▼	Aggregate	Year-to-Date ▼	]	
Full Nam	ne of Individual (Last, First, Middle Initia	al) or Full O	rganization Name	Date of Receipt	
Mailing A	Address			M = M / D = D / Y = Y = Y	
City		State	Zip Code	Amount of Each Receipt this Period	
	number of contributing political committee.	С			
Name of	Employer (for Individual)	Occi	upation (for Individual)	Memo Item	
	For: mary General her (specify)	Aggregate	Year-to-Date ▼		
SUBTOTA	L of Receipts This Page (optional)			5000.00	

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

5000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule	(s) check only	FOR LINE NUMBER: PAGE 7 OF 18 (check only one)		
	for each category of th Detailed Summary Pag		22 23 26 27 28b 28c <b>x</b> 29 30b		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)  AG AMERICA					
Full Name (Last, First, Middle Initial)  A. American Express			Date of Disbursement		
Mailing Address PO Box 650448			12 22 2016		
Dallas	State Zip Code TX 75265		FEC Identification Number		
Purpose of Disbursement Credit Card Payment, Non-Contribution Account (se	ee memo)	Category/	Transaction ID : SB29.4719 Amount of Each Disbursement this Period		
Senate President	Office Sought: Disbursement For: Senate Primary General				
State: District:  Full Name (Last, First, Middle Initial)  3. Autrey, Daniel, , ,  Mailing Address 3018 Cloverdale Road		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City  Montgomery  Purpose of Disbursement  Travel Expense, Non-Contribution Account	State Zip Code AL 36106		FEC Identification Number		
Candidate Name		Category/ Type	Transaction ID: SB29.4705 Amount of Each Disbursement this Period		
	nent For: Primary Genera Other (specify)	ıl	67.57  Memo Item		
Full Name (Last, First, Middle Initial)  Barnes Association Consultants			Date of Disbursement		
Mailing Address 5164 Brawner Place			12 22 7 2016		
City  Alexandria  Purpose of Disbursement  Campaign Mgmt. & Consulting, Non-Contribution Advanced	FEC Identification Number				
Candidate Name		Category/ Type	Transaction ID: SB29.4712 Amount of Each Disbursement this Period		
Office Sought: House Disbursen Senate President State: District:	nent For: Primary ☐ Genera Other (specify) ▼		3000.00 Memo Item		
SUBTOTAL of Disbursements This Page (optional)		·····	8067.57		
TOTAL This Period (last page this line number only)					

### S 17

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF 18				
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the		y one)			
		Summary Page	21b	22	23 26 27		
[	1		28a	28b	28c <b>x</b> 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na							
NAME OF COMMITTEE (In Full)							
AG AMERICA							
Full Name (Last, First, Middle Initial)							
A. Blue Wave				Date of Di	sbursement		
Mailing Address 3008 N 161st Terrace				12	17 2016		
City	State	Zip Code		FEC Identi	ification Number		
Omaha Purpose of Disbursement	NE	68116					
Campaign Mgmt. & Consulting, Travel, Telephone	Expenses	Non-		C			
Contribution Account Candidate Name					action ID : SB29.4703		
Candidate Name			Category/ Type	Amount of	Each Disbursement this Period		
Office Sought: House Disburse	ment For:		Турс	1	8316.92		
Senate	Primary	General					
President	Other (sp	ecify) ▼		Memo	Item		
State: District:				LI WOULD			
Full Name (Last, First, Middle Initial)							
B. Blue Wave				Date of Di	sbursement		
Mailing Address 2000 N 404 t Tarrass				12	22 2016		
Mailing Address 3008 N 161st Terrace				12	22 2010		
City	State NE	Zip Code		FEC Identi	ification Number		
Omaha Purpose of Disbursement	NE	68116					
Travel Expense Reimb., Non-Contribution Accoun	t			C			
Candidate Name			Category/		action ID: SB29.4713  Each Disbursement this Period		
			Type	7 0			
	ment For:			<u> </u>	1531.71		
Senate	Primary	General					
President State: District:	Other (sp	ecity)		Memo	Item		
Full Name (Last, First, Middle Initial)							
C. Caleb Consulting				Date of Di	sbursement		
Mailing Address 1105 Havre Lafitte Dr.				12	17 2016		
City	State	Zin Codo					
City Austin	State TX	Zip Code 78746		FEC Identi	ification Number		
Purpose of Disbursement Political Strategy Consulting, Non-Contribution Acc		1 121 12		С			
	Journ			Trans	action ID : SB29.4704		
Candidate Name			Category/	Amount of	Each Disbursement this Period		
Office Sought: House Disburse	ment For:		Туре	-	7083.33		
Senate	Primary	General			7 7 7		
President	Other (sp	ecify) ▼		Memo	Itom		
State: District:				Ivieillo			
					16931.96		
SUBTOTAL of Disbursements This Page (optional).			·····•		10931.90		
TOTAL This Period (last page this line number only	<i>(</i> )						

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LINE NUMBER: PAGE 9 OF 18 (check only one)			
TEMIZED DISBURSEMENTS	for each ca	ategory of the ummary Page	21b 28a	22 23 26 27 28b 28c <b>x</b> 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full) AG AMERICA		ee e. a.r.y permet				
Full Name (Last, First, Middle Initial)  - CMDI				Date of Disbursement		
Mailing Address 1593 Spring Hill Rd. Suite 400				12 14 2016		
,	tate VA	Zip Code 22182		FEC Identification Number		
Database, Non-Contribution Account  Candidate Name			Category/	Transaction ID : SB29.4714  Amount of Each Disbursement this Period		
	Primary	General	Type	250.00		
State: President O	Other (speci	fy) ▼		Memo Item		
Full Name (Last, First, Middle Initial)  B. Delta Air Lines, Inc.  Mailing Address PO Box 20706		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	state GA	Zip Code		FEC Identification Number		
Atlanta Purpose of Disbursement Travel Expense, Non-Contribution Account	GA	30320		C		
Candidate Name			Category/ Type	Transaction ID: SB29.4726 Amount of Each Disbursement this Period		
	nent For: Primary Other (specif	General fy)		1016.20 <b>X</b> Memo Item		
State: District:  Full Name (Last, First, Middle Initial)				Wello Itelli		
Farwell, Natalie, , ,				Date of Disbursement		
Mailing Address 4530 Merle Drive	ttoto .	Zin Codo		11 29 2016		
Austin Purpose of Disbursement	TX	Zip Code 78745		FEC Identification Number		
Event Management Services, Non-Contribution Accordance			Category/ Type	Transaction ID : SB29.4696 Amount of Each Disbursement this Period		
	nent For: Primary Other (speci	General fy) ▼	1,400	2214.58 Memo Item		
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).				2464.58		

### : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: SB29 Transaction ID: SB29.4726

Part of 11/29/2016 \$1,056.20 Doug Goehring payment

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check for each category of the		FOR LINE I (check only			
	Detailed Sum	mary Page	28a	28b 28c <b>x</b> 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)  AG AMERICA	and dudiess	any politica	. 55			
Full Name (Last, First, Middle Initial)  A. FIG Marketing Events				Date of Disbursement		
Mailing Address 5012 Desert Oak Circle				12 17 2016		
Austin		Code 8749		FEC Identification Number		
Purpose of Disbursement Travel Expense, Non-Contribution Account Candidate Name			Category	Transaction ID : SB29.4707  Amount of Each Disbursement this Period		
	Primary	General	Category/ Type	512.80		
State: District:	Other (specify)	▼		Memo Item		
Full Name (Last, First, Middle Initial)  B. FIG Marketing Events				Date of Disbursement		
Mailing Address 5012 Desert Oak Circle	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			12 17 2016		
,	l .	Code 78749		FEC Identification Number		
Event Management Services, Non-Contribution Acc Candidate Name	count		Category/ Type	Transaction ID : SB29.4708 Amount of Each Disbursement this Period		
	nent For: Primary Other (specify)	General	<b>7</b> F -	3750.00		
State: District:				Memo Item		
Full Name (Last, First, Middle Initial)  Goehring, Doug, , ,				Date of Disbursement		
Mailing Address 3816 Kingston Drive				11 29 2016		
Bismark Purpose of Disbursement		Code 88503		FEC Identification Number		
Travel Expense, Non-Contribution Account  Candidate Name			Category/ Type	Transaction ID: SB29.4702 Amount of Each Disbursement this Period		
	nent For: Primary Other (specify)	General ▼	турс	1056.20 Memo Item		
				5319.00		
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).				3000		

# 17

SCHEDULE B (FEC Form 3X)	Lies concrete colonials (a)   TOTT EINE NOWIDETT.			PAGE 12 OF 18		
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl	<b>,</b> — , —	<b>□</b>	] oc
		Summary Page	21b 28a		23 28c <b>x</b>	26 27 29 30b
Any information copied from such Reports and Stater	mente may r	not he sold or us				
or for commercial purposes, other than using the nar						
NAME OF COMMITTEE (In Full)						
AG AMERICA						
Full Name (Lock First Middle Livi D				İ		
Full Name (Last, First, Middle Initial)  A. Hyatt Regency - Lexington				Date of D	)isbursemer	nt
——————————————————————————————————————				M M	/ D D	/ Y Y Y Y
Mailing Address 401 West High Street				12	22	2016
City	State	Zin Codo				
City Lexington	State KY	Zip Code 40507		FEC Iden	tification Nu	umber
Purpose of Disbursement	0			С		
Travel Expense, AV, Catering/Food and Bev., Non-	-Contribution	Account			saction ID :	SB29.4723
Candidate Name			Category/	Amount o	f Each Disl	bursement this Period
Office Sought: House Disburser	ment For:		Туре			5000.00
Senate	Primary	General			7	7 - 7
President	Other (spec	cify) 🔻		<b>★</b> Mem	o Item	
State: District:						
Full Name (Last, First, Middle Initial)	inice#'			Data of 5	)iehuroom -	nt .
B. Ian M. Swanson - Zoe Life Commu	unication	8			isbursemer	
Mailing Address 3517 S 163 St.				12	17	2016
,	State NE	Zip Code		FEC Iden	tification Nu	umber
Omaha Purpose of Disbursement	INE	68130		С		
Communications Consulting Services, Non-Contrib	ution Accour	nt			action ID	SB29.4710
Candidate Name			Category/			bursement this Period
Office Sought:	mont Fa		Type			3000.00
Office Sought: House Disburser Senate	ment For: Primary	General			4	3000.00
President	Other (spec			П		
State: District:				Mem	o Item	
Full Name (Last, First, Middle Initial)						
C. Kansas Department of Agriculture				Date of D	isbursemer	
Mailing Address Office of the Secretary				11	29	2016
1320 Research Park Drive						
,	State	Zip Code		FEC Iden	tification Nu	umber
Manhattan Purpose of Disbursement	KS	66502				
Travel Expense, Non-Contribution Account				C	nastinu IP	CD20 4622
Candidate Name			Category/			: SB29.4699 bursement this Period
			Type			
	ment For:				4	1792.83
Senate President	Primary Other (spec	☐ General				
State: District:	Janor (Spec	-·· <i>J</i>		Mem	o Item	
SUBTOTAL of Disbursements This Page (optional)					7	4792.83
			·	-		
TOTAL This Period (last page this line number only)	)			1		

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	\ <b>I</b>	FOR LINE NUMBER: PAGE 13 OF 18 (check only one)		
	Detailed Summary Page	28a	28b 28c <b>x</b> 29 30b		
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)  AG AMERICA	to and address of any polit	our committee to	Const Continuations from Such Committee.		
Full Name (Last, First, Middle Initial)			D. (D.)		
A. MAXimum Compliance, LLC			Date of Disbursement		
Mailing Address 4703 Woodway Lane, NW			12 17 2016		
Washington	State Zip Code 20016		FEC Identification Number		
Purpose of Disbursement Bookkeeping, Non-Contribution Account			C		
Candidate Name		Category/ Type	Transaction ID: SB29.4709  Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify) ▼		2000.00		
State: District:			Memo Item		
Full Name (Last, First, Middle Initial)  B. Shelby, Rick, , ,  Mailing Address 119 Ingleside Avenue			Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City McLean	State Zip Code VA 22101		FEC Identification Number		
Purpose of Disbursement Travel Expense, Non-Contribution Account			C Transposition ID + SP20 4605		
Candidate Name		Category/ Type	Transaction ID: SB29.4695 Amount of Each Disbursement this Period		
	Primary General		776.87		
State: District:	Other (specify)		Memo Item		
Full Name (Last, First, Middle Initial)  C. United Airlines			Date of Disbursement		
Mailing Address 233 South Wacker Dr.			11 29 7 2016		
Chicago	State Zip Code IL 60606		FEC Identification Number		
Purpose of Disbursement Travel Expense, Non-Contribution Account Candidate Name	Transaction ID : SB29.4728				
		Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursen Senate President	nent For: Primary General Other (specify) ▼		523.20 <b>X</b> Memo Item		
State: District:			Wiellio Relli		
State: District:  SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only)			2776.87		

#### : 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: SB29 Transaction ID: SB29.4728

Part of 11/29/2016 \$776.87 Rick Shelby payment

Form/Schedule: Transaction ID:

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedulifor each category of	the check of	
	Detailed Summary Pa	age28	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full) AG AMERICA	is and address of diff	pomoai committee	to constructions from such confinites.
Full Name (Last, First, Middle Initial)  A. Weathers, Hugh, , ,			Date of Disbursement
Mailing Address PO Box 489			11 29 2016
,	State Zip Code SC 29018		FEC Identification Number
Travel Expense, Non-Contribution Account  Candidate Name		Category/	Transaction ID : SB29.4700 Amount of Each Disbursement this Period
	Primary Gene	Type	413.20
State: District:	Other (specify) ▼		Memo Item
Full Name (Last, First, Middle Initial)  3. Orbitz.com			Date of Disbursement
Mailing Address 333 108th Avenue, NE			11 29 2016
Bellevue	State Zip Code WA 98004		FEC Identification Number
Purpose of Disbursement Travel Expense, Non-Contribution Account  Candidate Name		Catagorii	Transaction ID : SB29.4700.0  Amount of Each Disbursement this Period
Office Sought: House Disbursem	nent For:	Category/ Type	Amount of Each Disbursement this Period
Senate	Primary Gene Other (specify)	eral	<b>✗</b> Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			M M / D D / Y Y Y Y
City	State Zip Code		FEC Identification Number
Purpose of Disbursement	C		
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
President	nent For: Primary Gene Other (specify) ▼	eral	Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)	·····	<b>&gt;</b>	413.20
TOTAL This Period (last page this line number only).			40766.01

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 16 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

18

NAME OF COMMITTEE (In Full) AG AMERICA					
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  American Express			Nature of Debt (Purpose): Credit Card Payment		
Mailing Address PO Box 650448					
City Dallas	State TX	Zip Code 75265			
Outstanding Balance Beginning This Period			Transaction ID : SD10.4618		
30959.97					
Amount Incurred This Period 1203.56	Payment This Period 5000.00		Outstanding Balance at Close of This Period 27163.53		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Barnes Association Consultants			Nature of Debt (Purpose): Campaign Mgmt. & Consulting		
Mailing Address 5164 Brawner Place			-		
City Alexandria	State	Zip Code 22304	-		
Outstanding Balance Beginning This Period	VA	22304	Transaction ID : SD10.4483		
3000.00					
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period		
0.00	-1-7-	3000.00	0.00		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Farwell, Natalie, , ,			Nature of Debt (Purpose): Event Management Services		
Mailing Address 4530 Merle Drive					
City Austin	State TX	Zip Code 78745			
Outstanding Balance Beginning This Period Transaction ID : SD10.4685					
2214.58	D	annut This David	Outstanding Release at Olege of This Region		
Amount Incurred This Period  0.00	Payment This Period 2214.58		Outstanding Balance at Close of This Period  0.00		
	7				
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	27163.53		
2) TOTALS This Period (last page this line number only)					
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶					

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE 17 OF 18 FOR LINE NUMBER: (check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) AG AMERICA				
A. Full Name (Last, First, Middle Initial) of Debtor FIG Marketing Events	Nature of Debt (Purpose): Travel Expense			
Mailing Address 5012 Desert Oak Circle			_	
City Austin	State TX	Zip Code 78749		
Outstanding Balance Beginning This Period			Transaction ID: SD10.4683	
512.80				
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
0.00		512.80	0.00	
B. Full Name (Last, First, Middle Initial) of Debtor of Goehring, Doug, , ,	or Creditor		Nature of Debt (Purpose): Travel Expense	
Mailing Address 3816 Kingston Drive				
City Bismark	State ND	Zip Code 58503		
Outstanding Balance Beginning This Period 1056.20			Transaction ID : SD10.4689	
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period	
0.00	<b>—</b>	1056.20	0.00	
C. Full Name (Last, First, Middle Initial) of Debtor Kansas Department of Agricultur	Nature of Debt (Purpose): Travel Expense			
Mailing Address Office of the Secretary 1320 Research Park Drive				
City Manhattan	State KS	Zip Code 66502		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4687	
1792.83				
Amount Incurred This Period	Payment This Period		Outstanding Balance at Close of This Period	
0.00	1 7	1792.83	0.00	
1) SUBTOTALS This Period This Page (optional)		<b>&gt;</b>	0.00	
2) TOTALS This Period (last page this line number of				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate li	ne of Summa	ry Page (last page only) ▶		

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

	9
×	10

18

18 OF

NAME OF COMMITTEE (In Full) AG AMERICA A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Travel Expense Shelby, Rick, , , Mailing Address 119 Ingleside Avenue State Zip Code McLean VA 22101 Transaction ID: SD10.4684 Outstanding Balance Beginning This Period 776.87 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 776.87 0.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 27163.53 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ...... 27163.53 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶