

# 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

YOPAC

ADDRESS (number and street) 5631 ABERDEEN RD

Check if different than previously reported. (ACC) FAIRWAY KS 66205

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

C C00497305

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M / D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y Y Y 01 / 01 / 2017 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2017

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

MEIER, J.THOMAS, , ,

Type or Print Name of Treasurer

Signature of Treasurer MEIER, J.THOMAS, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 31 / 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**YOPAC**

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="2017"/>		<input type="text" value="153284.31"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="153284.31"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="141165.70"/>	<input type="text" value="141165.70"/>
(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="294450.01"/>	<input type="text" value="294450.01"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="143941.80"/>	<input type="text" value="143941.80"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="150508.21"/>	<input type="text" value="150508.21"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**YOPAC**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 01 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y 06 / 30 / 2017

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12000.00	12000.00
(ii) Unitemized .....	100.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12100.00	12100.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73000.00	73000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	85100.00	85100.00
12. Transfers From Affiliated/Other Party Committees.....	56023.77	56023.77
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).....	41.93	41.93
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)).....▶	141165.70	141165.70
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	141165.70	141165.70

**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 .....	78941.80	78941.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	78941.80	78941.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	57500.00	57500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	7500.00	7500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	143941.80	143941.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143941.80	143941.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	85100.00	85100.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	85100.00	85100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	78941.80	78941.80
37. Offsets to Operating Expenditures (from Line 15, page 3).....	41.93	41.93
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	78899.87	78899.87

**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 49
	(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"/> 15
<input type="checkbox"/> 12	<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)  
**YOPAC**

**A. Debes, Jennifer, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5907 Frazier Ln  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Capitol Counsel Occupation (for Individual) Principal  
 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  
 06 / 14 / 2017  
**Transaction ID : SA11AI.5920**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item Contribution

**B. Higgins, Jennifer, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 770 P Street NW Apt. 328  
 City Washington State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chamberhill Strategies Occupation (for Individual) Partner  
 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  
 06 / 14 / 2017  
**Transaction ID : SA11AI.5926**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item Contribution

**C. Manocherian, Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 52 S. Bedford Road  
 City Pound Ridge State NY Zip Code 10576  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2017  
**Transaction ID : SA11AI.5969**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6250.00  
**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 49
<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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Manocherian, Jed, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18 East 50th Street  
 City New York State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Woodbranch Investments Occupation (for Individual) Real Estate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2017  
**Transaction ID : SA11AI.5968**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Norton, Melinda, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17720 E 1050th Rd  
 City Marshall State IL Zip Code 62441  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Suntanning Assn. Occupation (for Individual) Board President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 14 / 2017  
**Transaction ID : SA11AI.5924**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**C. Wiener, Jeffrey, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 410 First St SE Ste 300  
 City Washington State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M&W Government Affairs, LLC Occupation (for Individual) Partner & Co-Founder  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 14 / 2017  
**Transaction ID : SA11AI.5922**  
 Amount of Each Receipt this Period 250.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	12000.00

**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 8 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. ALTRIA GROUP, INC. POLITICAL ACTION COMMITTEE (ALTRIAPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 CONSTITUTION AVE NW  
 SUITE 400W  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00089136  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **04 / 04 / 2017**  
**Transaction ID : SA11C.6044**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**B. AMAZON CORPORATE LLC SEPARATE SEGREGATED FUND (AMAZON PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 NEW JERSEY AVE NW - SUITE 900  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00360354  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 30 / 2017**  
**Transaction ID : SA11C.5961**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. AMERICAN ASSOCIATION OF ORTHODONTISTS POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 401 N. LINDBERGH BLVD  
 City ST. LOUIS State MO Zip Code 63141  
 FEC ID number of contributing federal political committee. **C** C00293910  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 30 / 2017**  
**Transaction ID : SA11C.5967**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> 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 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON	State VA	Zip Code 20191
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

**Transaction ID : SA11C.5965**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1111 14TH STREET, NW SUITE 1100

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

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
06		30		2017

**Transaction ID : SA11C.5996**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**C. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PALLADIAN 1 220 LEIGH FARM RD

City DURHAM	State NC	Zip Code 27707
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FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

**Transaction ID : SA11C.5964**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> 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 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. BRYAN CAVE LLP POLITICAL ACTION COMMITTEE**

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

Mailing Address 1155 F STREET NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2017

**Transaction ID : SA11C.6038**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Contribution

**B. CIGAR-PAC**

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

Mailing Address 1100 G STREET, NW SUITE 1050

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 24 / 2017

**Transaction ID : SA11C.6065**

Amount of Each Receipt this Period  
500.00

Memo Item  
In-kind: PAC Event Supplies/Cigars

**C. CME GROUP INC. PAC**

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

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO State IL Zip Code 60606

FEC ID number of contributing federal political committee. **C** C00076299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2017

**Transaction ID : SA11C.5938**

Amount of Each Receipt this Period  
2500.00

Memo Item  
Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> 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 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CONSUMER TECHNOLOGY ASSOCIATION PAC**

Mailing Address 1919 SOUTH EADS STREET

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00375048

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	14	/	2017

**Transaction ID : SA11C.5935**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F STREET, NW SUITE 450

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	19	/	2017

**Transaction ID : SA11C.6046**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CREDIT SUISSE SECURITIES (USA) LLC POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F STREET, NW SUITE 450

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00111559

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

**Transaction ID : SA11C.5875**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> 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 12 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 400 PROFESSIONAL DRIVE  
 SUITE 400  
 City GAITHERSBURG State MD Zip Code 20879  
 FEC ID number of contributing federal political committee. **C** C00380303  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 19 / 2017  
**Transaction ID : SA11C.6036**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2980 FAIRVIEW PARK DRIVE  
 City FALLS CHURCH State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C** C00088591  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 01 / 19 / 2017  
**Transaction ID : SA11C.6033**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2980 FAIRVIEW PARK DRIVE  
 City FALLS CHURCH State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C** C00088591  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 14 / 2017  
**Transaction ID : SA11C.5936**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> 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 13 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

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

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2017

**Transaction ID : SA11C.5940**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**B. FRIENDS OF MEDICAL RESEARCH POLITICAL ACTION COMMITTEE**

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

Mailing Address 300 INDEPENDENCE AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00566042

Name of Employer (for Individual) Occupation (for Individual)

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
06		14		2017

**Transaction ID : SA11C.5927**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**C. FRIENDS OF MEDICAL RESEARCH POLITICAL ACTION COMMITTEE**

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

Mailing Address 300 INDEPENDENCE AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00566042

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2017

**Transaction ID : SA11C.5963**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> 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 14 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 MASSACHUSETTS AVENUE, NW  
 SUITE 400  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00076810  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 30 / 2017**  
**Transaction ID : SA11C.5997**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 CONSTITUTION AVE. NW  
 SUITE 500 WEST  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00096156  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 20 / 2017**  
**Transaction ID : SA11C.6037**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**C. INTERNATIONAL FRANCHISE ASSOCIATION FRANCHISING POLITICAL ACTION COMMITTEE INC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1900 K STREET NW  
 SUITE 700  
 City WASHINGTON State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C** C00084491  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 14 / 2017**  
**Transaction ID : SA11C.5928**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00  
**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 15 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC**

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

Mailing Address 3601 VINCENNES ROAD  
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268

FEC ID number of contributing federal political committee. **C** C00170258

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2017

**Transaction ID : SA11C.6040**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B. NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**

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

Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 220

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2017

**Transaction ID : SA11C.5994**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**C. POET PAC**

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

Mailing Address 4615 N LEWIS AVE

City SIOUX FALLS State SD Zip Code 57104

FEC ID number of contributing federal political committee. **C** C00450692

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2017

**Transaction ID : SA11C.5876**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00

**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 16 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. QUICKEN LOANS INC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 620

City LANSING State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00388827

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2017

**Transaction ID : SA11C.5877**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 WILSON BLVD  
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 05 / 2017

**Transaction ID : SA11C.5890**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**C. SPRINT CORPORATION POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6450 Sprint Parkway

City Overland Park State KS Zip Code 66251

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2017

**Transaction ID : SA11C.5930**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

**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 17 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

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

Mailing Address 1155 F STREET, NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2017

**Transaction ID : SA11C.6042**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. THERMO FISHER SCIENTIFIC INC. PAC**

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

Mailing Address 168 THIRD AVENUE

City WALTHAM State MA Zip Code 02451

FEC ID number of contributing federal political committee. **C** C00292318

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2017

**Transaction ID : SA11C.5962**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**C. UNITED PARCEL SERVICE INC. PAC**

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

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2017

**Transaction ID : SA11C.5939**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	73000.00

**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 18 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. KINZINGER-YOPAC VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS	State GA	Zip Code 30605
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00631044

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1486.89

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 14 / 2017  
**Transaction ID : SA12.5931**

Amount of Each Receipt this Period  
1486.89

Memo Item  
JFC Distribution

**B. BIPARTISAN VOLUNTARY PUBLIC AFFAIRS COMMITTEE OF THE PNC FINANCIAL SERVICES GROUP, INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 249 FIFTH AVENUE, 21ST FLOOR

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035519

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1750.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 17 / 2017  
**Transaction ID : SA12.5931.0**

Amount of Each Receipt this Period  
1750.00

Memo Item  
Transfer Memo

**C. EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 400 PROFESSIONAL DRIVE SUITE 400

City GAITHERSBURG	State MD	Zip Code 20879
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2017  
**Transaction ID : SA12.5931.1**

Amount of Each Receipt this Period  
2000.00

Memo Item  
Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1486.89
<b>TOTAL</b> 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 19 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. YODER VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00524843

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
9870.11

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 11 / 2017

**Transaction ID : SA12.6028**

Amount of Each Receipt this Period  
9870.11

Memo Item  
JFC Distribution

**B. Ferrell, Elizabeth, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3140 Tomahawk Road

City Mission Hills	State KS	Zip Code 66208
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Homemaker Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2017

**Transaction ID : SA12.6028.0**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

**C. Ferrell, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3140 Tomahawk Road

City Mission Hills	State KS	Zip Code 66208
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Ferrellgas Partners Chairman

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 13 / 2017

**Transaction ID : SA12.6028.1**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9870.11
<b>TOTAL</b> 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 20 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. YODER VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00524843

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
34712.16

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2017

**Transaction ID : SA12.5878**

Amount of Each Receipt this Period  
24842.05

Memo Item  
JFC Distribution

**B. Barton, Tim, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Congress Ave, Unit 27EG

City Austin	State TX	Zip Code 78701
----------------	-------------	-------------------

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

Name of Employer (for Individual) Freightquote	Occupation (for Individual) Founder
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2017

**Transaction ID : SA12.5878.0**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

**C. DeBruce, Paul, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 Nichols Rd, Suite 217

City Kansas City	State MO	Zip Code 64112
---------------------	-------------	-------------------

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

Name of Employer (for Individual) DeBruce Foundation	Occupation (for Individual) Founder & CEO
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2017

**Transaction ID : SA12.5878.1**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	24842.05
<b>TOTAL</b> 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 21 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. DeBruce, Linda, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 411 Nichols Rd  
 Ste 217  
 City Kansas City State MO Zip Code 64112  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Community Volunteer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2017  
**Transaction ID : SA12.5878.2**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Transfer Memo

**B. Herrmann, Henry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6300 Lamar Ave  
 City Shawnee Mission State KS Zip Code 66201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Waddell & Reed Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2017  
**Transaction ID : SA12.5878.3**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Transfer Memo

**C. Herrmann, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6300 Lamar Ave  
 City Shawnee Mission State KS Zip Code 66201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Community Volunteer  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 04 / 2017  
**Transaction ID : SA12.5878.4**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> 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 22 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. YODER VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 901 N WASHINGTON ST SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00524843

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
54536.88

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2017

**Transaction ID : SA12.5971**

Amount of Each Receipt this Period  
19824.72

Memo Item  
JFC Distribution

**B. Hebenstreit, Marilyn, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5825 Pembroke Ct

City Mission Hills	State KS	Zip Code 66208
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Self Employed Community Volunteer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2017

**Transaction ID : SA12.5971.0**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

**C. Hebenstreit, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 5825 Pembroke Ct

City Mission Hills	State KS	Zip Code 66208
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
Bartlett Chairman

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2017

**Transaction ID : SA12.5971.1**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	19824.72
<b>TOTAL</b> 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 23 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Webb, Richard, , ,</b>		Date of Receipt
Mailing Address 315 West 3rd		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Pittsburg	State KS	Zip Code 66762
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.5971.2</b>
Name of Employer (for Individual) Watco Companies		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) CEO		<input checked="" type="checkbox"/> Memo Item Transfer Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Webb, Stacey, , ,</b>		Date of Receipt
Mailing Address 315 West 3rd		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Pittsburg	State KS	Zip Code 66762
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.5971.3</b>
Name of Employer (for Individual) Self Employed		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) Community Volunteer		<input checked="" type="checkbox"/> Memo Item Transfer Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Lundy, Gary, , ,</b>		Date of Receipt
Mailing Address 507 W Crestview Ave		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2017"/>
City Pittsburg	State KS	Zip Code 66762
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA12.5971.4</b>
Name of Employer (for Individual) WATCO		Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Occupation (for Individual) Chairman of the Board		<input checked="" type="checkbox"/> Memo Item Transfer Memo
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 24 OF 49
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lundy, Susan, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2017 <b>Transaction ID : SA12.5971.5</b>
Mailing Address 507 W Crestview Ave		Amount of Each Receipt this Period 2500.00
City Pittsburg	State KS	Zip Code 66762
FEC ID number of contributing federal political committee. C		<input checked="" type="checkbox"/> Memo Item Transfer Memo
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Community Volunteer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual)	Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	56023.77



**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. ABH Consulting</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2017
Mailing Address 3410 Alabama Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5863</b> Amount of Each Disbursement this Period [ ] 12035.00
City Alexandria	State VA	Zip Code 22305
Purpose of Disbursement PAC Fundraising Consulting		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. ABH Consulting</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2017
Mailing Address 3410 Alabama Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5864</b> Amount of Each Disbursement this Period [ ] 6196.97
City Alexandria	State VA	Zip Code 22305
Purpose of Disbursement PAC Event Expense: Lodging/Shipping/Transportation/Travel		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. ABH Consulting</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2017
Mailing Address 3410 Alabama Ave		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5865</b> Amount of Each Disbursement this Period [ ] 93.81
City Alexandria	State VA	Zip Code 22305
Purpose of Disbursement PAC Shipping		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 18325.78
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. ABH Consulting</b>			Date of Disbursement MM / DD / YYYY 05 / 17 / 2017		
Mailing Address 3410 Alabama Ave			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5906</b> Amount of Each Disbursement this Period [ ] 2500.00 <input type="checkbox"/> Memo Item		
City Alexandria	State VA	Zip Code 22305	Category/Type [ ]		
Purpose of Disbursement PAC Event Expense: Entertainment			Candidate Name [ ]		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		
Full Name (Last, First, Middle Initial) <b>B. ABH Consulting</b>			Date of Disbursement MM / DD / YYYY 05 / 17 / 2017		
Mailing Address 3410 Alabama Ave			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5907</b> Amount of Each Disbursement this Period [ ] 4065.90 <input type="checkbox"/> Memo Item		
City Alexandria	State VA	Zip Code 22305	Category/Type [ ]		
Purpose of Disbursement PAC Event Expense: Airfare/Lodging/Printing/Food & Beverage			Candidate Name [ ]		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:		
Full Name (Last, First, Middle Initial) <b>C. ABH Consulting</b>			Date of Disbursement MM / DD / YYYY 06 / 27 / 2017		
Mailing Address 3410 Alabama Ave			FEC Identification Number C [ ] <b>Transaction ID : SB21B.5942</b> Amount of Each Disbursement this Period [ ] 9447.98 <input type="checkbox"/> Memo Item		
City Alexandria	State VA	Zip Code 22305	Category/Type [ ]		
Purpose of Disbursement PAC Event Expense: Transportation/Printing/Shipping/Food & Beverage/Event Deposit Candidate Name			Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:			
<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶			[ ] 16013.88		
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Agua 301</b>		Date of Disbursement MM / DD / YYYY 01 / 26 / 2017	
Mailing Address 301 Water St, SE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5850</b> Amount of Each Disbursement this Period 942.42	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement PAC Event Expense: Food & Beverage			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6000</b> Amount of Each Disbursement this Period 581.40	
City Fort Worth	State TX	Zip Code 76155	Category/ Type
Purpose of Disbursement PAC Airfare			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017	
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6002</b> Amount of Each Disbursement this Period 581.40	
City Fort Worth	State TX	Zip Code 76155	Category/ Type
Purpose of Disbursement PAC Airfare			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2105.22
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.6003</b> Amount of Each Disbursement this Period 581.40
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PAC Airfare	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2017
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C <b>Transaction ID : SB21B.6005</b> Amount of Each Disbursement this Period 581.40
City Fort Worth	State TX	
Zip Code 76155	Purpose of Disbursement PAC Airfare	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ashby Law PLLC</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017
Mailing Address 717 Princess Street		FEC Identification Number C <b>Transaction ID : SB21B.5844</b> Amount of Each Disbursement this Period 481.25
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement PAC Legal Services	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1644.05
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Ashby Law PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address 717 Princess Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Legal Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 06 / 12 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5911

Amount of Each Disbursement this Period: 893.75

Memo Item

**B. Balancing Acts, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 1328 U St NW #1W

City Washington State DC Zip Code 20009

Purpose of Disbursement PAC Event Expense: Event Deposit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 05 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.5869

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. CIGAR-PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1100 G STREET, NW SUITE 1050

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement In-kind: PAC Event Supplies/Cigars

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement MM / DD / YYYY: 05 / 24 / 2017

FEC Identification Number: C C00121350

Transaction ID : SB21B.6066

Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3893.75

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial)  
**A. Federal City Caterers, Inc.**

Mailing Address 1119 12th St, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
PAC Event Expense: Catering

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 01 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.5889**  
Amount of Each Disbursement this Period  
1389.03

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Federal City Caterers, Inc.**

Mailing Address 1119 12th St, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
PAC Event Expense: Equipment Rental

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
06 / 27 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.5941**  
Amount of Each Disbursement this Period  
137.48

Memo Item

Full Name (Last, First, Middle Initial)  
**C. First American Land Title**

Mailing Address 1825 I St NW  
Ste 302

City Washington State DC Zip Code 20006

Purpose of Disbursement  
PAC Event Expense: Space Rental/Food & Beverage

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 13 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.5891**  
Amount of Each Disbursement this Period  
11500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 13026.51

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Granados, Kristina, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2017
Mailing Address 18619 Wilderness Way		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6059</b> Amount of Each Disbursement this Period [ ] 455.00
City Hagerstown	State MD	Zip Code 21740
Purpose of Disbursement PAC Event Expense: Entertainment		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. KeBo Restaurant</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2017
Mailing Address 200 Crandon Blvd #104		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6050</b> Amount of Each Disbursement this Period [ ] 686.25
City Key Biscayne	State FL	Zip Code 33149
Purpose of Disbursement PAC Event Expense: Food & Beverage		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017
Mailing Address 901 N Washington St, Suite 700		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5843</b> Amount of Each Disbursement this Period [ ] 582.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1723.25
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2017
Mailing Address 901 N Washington St, Suite 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5847</b> Amount of Each Disbursement this Period [REDACTED] 914.16
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 901 N Washington St, Suite 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5946</b> Amount of Each Disbursement this Period [REDACTED] 1720.38
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Neighborhood Signs and Stickers, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2017
Mailing Address 6655 Amberton St Ste K		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5886</b> Amount of Each Disbursement this Period [REDACTED] 3335.88
City Elkridge	State MD	Zip Code 21075
Purpose of Disbursement PAC Event Expense: Cups/Shirts/Keychains		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5970.42
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Omni Homestead Resort</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017	
Mailing Address 1766 Homestead Dr		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6013</b> Amount of Each Disbursement this Period [ ] 306.29	
City Hot Springs	State VA	Zip Code 24445	Category/ Type [ ]
Purpose of Disbursement PAC Food & Beverage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Omni Homestead Resort</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017	
Mailing Address 1766 Homestead Dr		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6016</b> Amount of Each Disbursement this Period [ ] 6.56	
City Hot Springs	State VA	Zip Code 24445	Category/ Type [ ]
Purpose of Disbursement PAC Food & Beverage		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Omni Homestead Resort</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2017	
Mailing Address 1766 Homestead Dr		FEC Identification Number C [ ] <b>Transaction ID : SB21B.6017</b> Amount of Each Disbursement this Period [ ] 770.50	
City Hot Springs	State VA	Zip Code 24445	Category/ Type [ ]
Purpose of Disbursement PAC Lodging		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

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

[ ] 1083.35

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Sosa & Associates Services, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1813 Gilson St

City Falls Church State VA Zip Code 22043

Purpose of Disbursement  
PAC Event Expense: Catering

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 13 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.6060**

Amount of Each Disbursement this Period  
1517.49

Memo Item

**B. The Bullpen**

Full Name (Last, First, Middle Initial)

Mailing Address 1201 Half St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Event Expense: Food & Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 25 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.5848**

Amount of Each Disbursement this Period  
2084.06

Memo Item

**C. The Fairmont**

Full Name (Last, First, Middle Initial)

Mailing Address 2401 M St NW

City Washington State DC Zip Code 20037

Purpose of Disbursement  
PAC Food & Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
02 / 07 / 2017

FEC Identification Number  
**C**

**Transaction ID : SB21B.5852**

Amount of Each Disbursement this Period  
407.60

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4009.15

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. The Tactical Girl</b>			Date of Disbursement MM / DD / YYYY 03 / 03 / 2017	
Mailing Address 706 Inwood Dr			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5867</b> Amount of Each Disbursement this Period 2869.10	
City Southlake	State TX	Zip Code 76092	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Event Expense: Apparel/Pullovers/Koozies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. The Tactical Girl</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 706 Inwood Dr			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5951</b> Amount of Each Disbursement this Period 2877.48	
City Southlake	State TX	Zip Code 76092	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Event Expense: Apparel/Pullovers		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Washington Nationals</b>			Date of Disbursement MM / DD / YYYY 06 / 29 / 2017	
Mailing Address 1500 S Capitol St SE			FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.6024</b> Amount of Each Disbursement this Period 603.00	
City Washington	State DC	Zip Code 20003	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Event Expense: Food & Beverage		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6349.58
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Zengo</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2017	
Mailing Address 781 7th St NW		FEC Identification Number C [ ]	
City Washington	State DC	Zip Code 20001	Transaction ID : <b>SB21B.5856</b>
Purpose of Disbursement PAC Event Expense: Food & Beverage		Category/ Type [ ]	Amount of Each Disbursement this Period 2336.04
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ]	
City	State	Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement		Category/ Type [ ]	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2336.04
<b>TOTAL</b> This Period (last page this line number only).....▶	78184.97



**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"/> 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)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. DENHAM FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 2150 RIVER PLAZA DR., #150		FEC Identification Number C 000473272 <b>Transaction ID : SB23.5959</b>
City SACRAMENTO	State CA	Zip Code 95833
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>DENHAM, JEFF, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA	District: 10	

Full Name (Last, First, Middle Initial) <b>B. DON BACON FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address PO BOX 391368		FEC Identification Number C 000575167 <b>Transaction ID : SB23.5809</b>
City OMAHA	State NE	Zip Code 68139
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>BACON, DONALD, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District: 02	

Full Name (Last, First, Middle Initial) <b>C. DREW FERGUSON FOR CONGRESS INC.</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address PO BOX 387		FEC Identification Number C 000607838 <b>Transaction ID : SB23.5829</b>
City WEST POINT	State GA	Zip Code 31833
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>FERGUSON, ANDERSON DREW, , , IV</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 03	

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

4500.00

**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"/> 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)  
**YOPAC**

**A. DUNCAN D. HUNTER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1545

M M M	/	D D D	/	Y Y Y Y Y
06		29		2017

City EL CAJON State CA Zip Code 92022

FEC Identification Number

Purpose of Disbursement Contribution

C	C00433524
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Candidate Name  
**HUNTER, DUNCAN, D., ,**

Category/Type

**Transaction ID : SB23.5954**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: CA District: 50

5000.00
---------

Memo Item

**B. FASO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 448

M M M	/	D D D	/	Y Y Y Y Y
01		23		2017

City KINDERHOOK State NY Zip Code 12106

FEC Identification Number

Purpose of Disbursement Contribution

C	C00580415
---	-----------

Candidate Name  
**FASO, JOHN, J., ,**

Category/Type

**Transaction ID : SB23.5812**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: NY District: 19

1000.00
---------

Memo Item

**C. FRIENDS OF NEAL DUNN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 16088

M M M	/	D D D	/	Y Y Y Y Y
01		23		2017

City PANAMA CITY State FL Zip Code 32406

FEC Identification Number

Purpose of Disbursement Contribution

C	C00582304
---	-----------

Candidate Name  
**DUNN, NEAL, P., ,**

Category/Type

**Transaction ID : SB23.5826**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
 Disbursement For: 2018  Primary  General  Other (specify) ▼  
 State: FL District: 02

1000.00
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Memo Item

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

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

7000.00
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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"/> 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)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF PAUL MITCHELL</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2017
Mailing Address 66860 VAN DYKE ROAD		FEC Identification Number C00581090 <b>Transaction ID : SB23.5818</b>
City WASHINGTON	State MI	Zip Code 48095
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>MITCHELL, PAUL III, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 10	

Full Name (Last, First, Middle Initial) <b>B. HOOSIERS FOR ROKITA, INC.</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 5802 OAK AVENUE		FEC Identification Number C00476192 <b>Transaction ID : SB23.5914</b>
City INDIANAPOLIS	State IN	Zip Code 46219
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>ROKITA, THEODORE EDWARD, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN	District: 04	

Full Name (Last, First, Middle Initial) <b>C. HURD FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address PO BOX 761029		FEC Identification Number C00545467 <b>Transaction ID : SB23.5958</b>
City SAN ANTONIO	State TX	Zip Code 78245
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>HURD, WILLIAM, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 23	

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

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

6000.00

**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"/> 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)  
**YOPAC**

**A. JASON LEWIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 515

City COTTAGE GROVE State MN Zip Code 55016

Purpose of Disbursement Contribution

Candidate Name LEWIS, JASON, M., ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MN District: 02

Date of Disbursement: 01 / 23 / 2017

FEC Identification Number: C00589234  
Transaction ID : SB23.5815  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. KANSANS FOR MARSHALL**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1588

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement Contribution

Candidate Name MARSHALL, ROGER, W., ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: KS District: 01

Date of Disbursement: 01 / 23 / 2017

FEC Identification Number: C00576173  
Transaction ID : SB23.5803  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. MIKE GALLAGHER FOR WISCONSIN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1027

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement Contribution

Candidate Name GALLAGHER, MICHAEL JOHN, , ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: WI District: 08

Date of Disbursement: 01 / 23 / 2017

FEC Identification Number: C00610212  
Transaction ID : SB23.5830  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

**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"/> 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)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. NRCC</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2017
Mailing Address 320 FIRST STREET SE		FEC Identification Number C 00075820 <b>Transaction ID : SB23.5837</b>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 15000.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Annual	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. RON ESTES FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2017
Mailing Address 12224 E BRACKEN CT		FEC Identification Number C 00632067 <b>Transaction ID : SB23.5860</b>
City WICHITA	State KS	Zip Code 67206
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>ESTES, RON, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KS	District: 04	

Full Name (Last, First, Middle Initial) <b>C. RON ESTES FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 29 / 2017
Mailing Address 12224 E BRACKEN CT		FEC Identification Number C 00632067 <b>Transaction ID : SB23.5960</b>
City WICHITA	State KS	Zip Code 67206
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>ESTES, RON, , ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: KS	District: 04	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	22500.00
<b>TOTAL</b> 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"/> 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)  
**YOPAC**

**A. RYAN COSTELLO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3154

City  
WEST CHESTER

State  
PA

Zip Code  
19381

Purpose of Disbursement  
Contribution

Candidate Name

**COSTELLO, RYAN, A., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	0		2	0	1	7		

FEC Identification Number

**C** C00554899

**Transaction ID : SB23.5896**

Amount of Each Disbursement this Period

5000.00

Memo Item

**B. SMUCKER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1551

City  
LANCASTER

State  
PA

Zip Code  
17608

Purpose of Disbursement  
Contribution

Candidate Name

**SMUCKER, LLOYD, K., ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: PA District: 16

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	9		2	0	1	7		

FEC Identification Number

**C** C00599464

**Transaction ID : SB23.5947**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. TENNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 28 ROBINSON ROAD  
PO BOX 128

City  
CLINTON

State  
NY

Zip Code  
13323

Purpose of Disbursement  
Contribution

Candidate Name

**TENNEY, CLAUDIA, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: NY District: 22

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	3		2	0	1	7		

FEC Identification Number

**C** C00561183

**Transaction ID : SB23.5823**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

**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"/> 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)  
**YOPAC**

**A. ZELDIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement Contribution

Candidate Name ZELDIN, LEE M, , ,

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

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement: 03 / 30 / 2017

FEC Identification Number: C00552547  
Transaction ID : SB23.5897  
Amount of Each Disbursement this Period: 3000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	57500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial) <b>A. Farassati For Overland Park City Council</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2017
Mailing Address 12704 Woodson St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5990</b>
City Overland Park	State KS	Zip Code 66209
Purpose of Disbursement Non-Federal Contribution		Amount of Each Disbursement this Period [ ] 250.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Gerlach For Overland Park Mayor</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2017
Mailing Address 10084 Hemlock Dr		FEC Identification Number C [ ] <b>Transaction ID : SB29.5980</b>
City Overland Park	State KS	Zip Code 66212
Purpose of Disbursement Non-Federal Contribution		Amount of Each Disbursement this Period [ ] 500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Goodman For Overland Park City Council</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2017
Mailing Address 12509 Barton St		FEC Identification Number C [ ] <b>Transaction ID : SB29.5986</b>
City Overland Park	State KS	Zip Code 66213
Purpose of Disbursement Non-Federal Contribution		Amount of Each Disbursement this Period [ ] 250.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 1000.00
<b>TOTAL</b> 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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Janson For Overland Park City Council**

Full Name (Last, First, Middle Initial)

Mailing Address 6827 Reeds Rd

City Overland Park State KS Zip Code 66204

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 29 / 2017

FEC Identification Number: C

Transaction ID : SB29.6054

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Johnson County Republican Party**

Full Name (Last, First, Middle Initial)

Mailing Address 10107 W 105th St

City Overland Park State KS Zip Code 66212

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB29.5893

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. KCC Educational Foundation/Leadership Kansas**

Full Name (Last, First, Middle Initial)

Mailing Address 7101 College Blvd Ste 400

City Overland Park State KS Zip Code 66210

Purpose of Disbursement Charitable Donation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB29.5943

Amount of Each Disbursement this Period: 250.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

Full Name (Last, First, Middle Initial)  
**A. Kelsey Smith Foundation Inc.**

Date of Disbursement: MM / DD / YYYY  
06 / 28 / 2017

Mailing Address PO Box 40393

City Overland Park State KS Zip Code 66204

Purpose of Disbursement Charitable Donation/Event Sponsorship

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.5945  
Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Kite For Overland Park City Council**

Date of Disbursement: MM / DD / YYYY  
06 / 28 / 2017

Mailing Address 10427 Caenen Dr

City Overland Park State KS Zip Code 66215

Purpose of Disbursement Non-Federal Contribution

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.5984  
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Raul Labrador For Governor**

Date of Disbursement: MM / DD / YYYY  
06 / 29 / 2017

Mailing Address PO Box 1616

City Boise State ID Zip Code 83701

Purpose of Disbursement Non-Federal Contribution

Candidate Name

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

State: District:

FEC Identification Number: C  
Transaction ID : SB29.5952  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3250.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**YOPAC**

**A. Skoog For Overland Park City Council**

Full Name (Last, First, Middle Initial)

Mailing Address 9505 Linden St

City Overland Park State KS Zip Code 66207

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB29.5982

Amount of Each Disbursement this Period: 250.00

Memo Item

**B. Stuke For Lenexa City Council**

Full Name (Last, First, Middle Initial)

Mailing Address 13301 W 91st St

City Lenexa State KS Zip Code 66215

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB29.5992

Amount of Each Disbursement this Period: 250.00

Memo Item

**C. Thompson For Overland Park City Council**

Full Name (Last, First, Middle Initial)

Mailing Address 5709 W 128th Ter

City Overland Park State KS Zip Code 66209

Purpose of Disbursement Non-Federal Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB29.5988

Amount of Each Disbursement this Period: 250.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7500.00