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Image# 201604159012473819

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	or Other Than	An Authorized	I Committee			Office Use Onl	у
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		mple: If typing, r the lines.	type	12FE4M5		
Charter Schools Action	PAC						
ADDRESS (number and street)	1101 15th Street	, NW					
Check if different than previously reported. (ACC)	Suite 1010 Washington				DC	20005	]-[
2. FEC IDENTIFICATION NU	MBER ▼	CITY 🛦			STATE 🛦	ZIP (	CODE A
C C00576215		3. IS THIS REPORT	X NE		AN (A)	1ENDED	
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:  X April 15 Quarterly Report (Quarterly Report (Non-election Year Only) (MY)  Termination Report (TER)	(c) 12-Day PRE-E Report  (d) 30-Day POST-	Election Election on	Jur Jul Primary (12P) Convention (12	y 20 (M5) n 20 (M6) 20 (M7)	Sep	12S) in th State	Special (30S)
5. Covering Period 01	/ 01 /	2016	through	M M M	31	2016	
I certify that I have examined this Type or Print Name of Treasurer	•	ne best of my kno	wledge and bel	lief it is tru	ue, correct and	d complete.	
Signature of Treasurer Victor	Klatt III		[Electronically F	iled] [	Date 04	/ 15	2016
NOTE: Submission of false, errone	ous, or incomplete	information may su	bject the persor	n signing tl	nis Report to th	ne penalties of	2 U.S.C. §437g.
Office Use Only						FEC FC Rev. 12	

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Charter Schools Action PAC 01 2016 03 2016 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 3875.00 January 1, 2016 (b) Cash on Hand at 3875.00 Beginning of Reporting Period..... 10000.00 10000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 13875.00 13875.00 6(a) and 6(c) for Column B)..... 5600.00 5600.00 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 8275.00 8275.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Charter	<b>Schools</b>	Action	PAC
Onanci		/ (СПОП	1 / 10

Report Covering the Period: From: 01	01 2016 To	93 31 2016
I. Receipts	COLUMN B Calendar Year-to-Date	
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	10000.00	10000.00
(i) Itemized (use Schedule A)	1000.00	1000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	10000.00	10000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	202	
(such as PACs)	0.00	0.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	10000.00	10000.00
Totals to Line 33, page 5)	10000.00	10000:00
2. Transfers From Affiliated/Other	0.00	0.00
Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
. All LOUIS HECCHVEU	7	
Loan Pongumente Pessived	0.00	0.00
. Loan Repayments Received	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made	7	7 7
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts	7	
(Dividends, Interest, etc.)	0.00	0.00
3. Transfers from Non-Federal and Levin Funds	7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
=		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
=		
P. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	10000.00	10000.00
	, , , , , , , , , , , , , , , , , , , ,	
D. Total Federal Receipts	40000.00	
(subtract Line 18(c) from Line 19)▶	10000.00	10000.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	Total This Period		
<ul> <li>Operating Expenditures: —         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ul>		Calendar Year-to-Date	
Activity (from Schedule H4)	0.00	0.00	
(i) Federal Share			
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	600.00	600.00	
Expenditures(c) Total Operating Expenditures	000.00	000.00	
(add 21(a)(i), (a)(ii), and (b))▶	600.00	600.00	
. Transfers to Affiliated/Other Party	0.00	0.00	
Committees Contributions to	0.00	0.00	
Federal Candidates/Committees and Other Political Committees	5000.00	5000.00	
. Independent Expenditures			
(use Schedule E)	0.00	0.00	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
(ass soriodale i )			
. Loan Repayments Made	0.00	0.00	
. Loans Made	0.00	0.00	
. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
	0.00	0.00	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(such as PACs)	0.00	0.00	
(d) Tatal Cantribution Defined			
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00	
(444 21166 25(4), (5), 414 (6),			
Other Disbursements	0.00	0.00	
. Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)	000		
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely			
With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	5600.00	5600.00	
. Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	5600.00	5600.00	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10000.00	10000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	10000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	600.00	600.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	600.00	600.00

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

	FOR LINE NUMBER: PAGE 6 OF 8							8			
Use separate schedule(s) for each category of the	(ch	eck only	or	ne)							
Detailed Summary Page	×	11a		11b		11c		12			
		13		14		15		16	; [		17

or for commercial purposes, other than using	the name and address of any political committee	
NAME OF COMMITTEE (In Full) Charter Schools Action PAC		
Full Name (Last, First, Middle Initial) Carrie W. Penner  Mailing Address 3000 Sand Hill Rd. Building 1, Suite 150  City Menlo Park  FEC ID number of contributing federal political committee.  Name of Employer Walton Family Foundation  Receipt For: Primary General Other (specify)	State Zip Code CA 94025  C  Occupation Board Member  Aggregate Year-to-Date ▼  5000.00	Date of Receipt  02 12 2016  Transaction ID: SA11AI.4123  Amount of Each Receipt this Period  5000.00  Memo Item  Contribution
Full Name (Last, First, Middle Initial)  Gregory B. Penner  Mailing Address P.O. Box 1860  City  Bentonville  FEC ID number of contributing federal political committee.  Name of Employer  Wal-Mart Stores, Inc.  Receipt For:  Primary  Other (specify)	State Zip Code AR 72712  C  Occupation Chairman  Aggregate Year-to-Date ▼  5000.00	Date of Receipt  02 12 2016  Transaction ID : SA11AI.4124  Amount of Each Receipt this Period  5000.00  Memo Item Contribution
Full Name (Last, First, Middle Initial)  Mailing Address  City  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)	State Zip Code  C Occupation  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period  Memo Item
SUBTOTAL of Receipts This Page (optional)		10000.00
TOTAL This Period (last page this line numb	per only)	10000.00

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)  Charter Schools Action PAC  Full Name (Last, First, Middle Initial)  BMO Consulting LLC  Mailing Address PO Box 9891  City  Amount of Each Disbursement this Period  Candidate Name  Candidate Name  Disbursement For:  Senate  Primary  Other (specify)  Tunesident  State:  District:  Full Name (Last, First, Middle Initial)  Mailing Address  City  State  Zip Code  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement  Category/ Type  Office Sought:  House  Disbursement For:  Senate  Primary  General  Other (specify)  Category/ Type  Office Sought:  House  Senate  Primary  General  Other (specify)  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Category/ Type  Office Sought:  House  Senate  Primary  General  Other (specify)  Other (specify)  Type  Other (specify)  Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)	Hen concrete cohedula(s)	FOR LINE		PAGE 7 OF 8	
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)  Charter Schools Action PAC  Full Name (Last, First, Middle Initial)  BMO Consulting LLC  Mailing Address PO Box 9891  City  Amount of Each Disbursement this Period  Category'  Type  Office Sought: House	ITEMIZED DISBURSEMENTS	for each category of the	X 21b	22		
NAME OF COMMITTEE (in Full) Charter Schools Action PAC  Full Name (Last, First, Middle Initial) BMO Consulting LLC  Mailing Address PO Box 9991  City Adingon VA 22219  Furpose of Disbursement Accounting and Compliance Cardidata Name  City President State:  City State City Memolitem  Amount of Each Disbursement this Period Category Type Memolitem  Date of Disbursement  Amount of Each Disbursement this Period Category Type Memolitem  Cardidate Name Category Type Memolitem  Cardidate Name City State City Memolitem  Amount of Each Disbursement this Period Category Type Memolitem  Amount of Each Disbursement this Period Memolitem  Category Type Memolitem  Amount of Each Disbursement this Period Memolitem  Category Type Memolitem  Amount of Each Disbursement this Period Memolitem  Condidate Name Category Type Memolitem  Condidate Name Category Type Memolitem  Amount of Each Disbursement this Period Category Type Memolitem  Condidate Name Category Type Mem						
A BMO Consulting LLC  Mailing Address PO Box 9891  City State Zip Code VA 22219  Priprose of Disbursement Accounting and complaince  Candidate Name  Category/ Citice Sought: House Primary General Primary G	NAME OF COMMITTEE (In Full)	io and address of any political	COMMITTEE TO	Solicit continue	and a dominate.	
Mailing Address PO Box 9891  City State Zip Code VA 22219  Purpose of Disbursement Accounting and compliance  Cardidate Name  City State District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Date of Disbursement this Period  Category/  Type  Memo Item  Date of Disbursement this Period  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Amount of Each Disbursement this Period  Category/  Type  Memo Item  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ T				Date of Dist	nursamant	
City	- BIVIO Consulting LLC	Bivio Consulting LLC				
Arington Purpose of Disbursement Accounting and compliance Candidate Name Category/ President State: District:  Full Name (Last, First, Middle Initial)  Mailing Address City State: Disbursement Candidate Name  Office Sought: House President Category/ Type  Disbursement  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item  Amount of Each Disbursement Inis Period  Category/ Type  Memo Item	Mailing Address PO Box 9891	02 09 2016				
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Office Sought: House Senate President State: District: Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  State: District: Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement For: Memo Item  Date of Disbursement This Period  Category/ Type  Date of Disbursement  Amount of Each Disbursement  Date of Disbursement  Amount of Each Disbursement  Amount of Each Disbursement  Date of Disbursement  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District: District: Senate Primary General Other (specify) ▼  Substotal Other (specify) ▼  Substotal Other (specify) ▼  Substotal Other (specify) ▼	Candidate Name	1			600.00	
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Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Full Name (Last, First, Middle Initial)  Candidate Name  Category/ Type  Memo Item  Date of Disbursement  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)   Office Sought: House Disbursement For: Senate Primary General Other (specify)   State: District:  Substortal of Disbursements This Page (optional)	Mailing Address		. M = M / D = D / Y = Y = Y			
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Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  State: District:  Substruct: Memo Item  600.00						
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Primary General President Other (specify)   State: District:  SUBTOTAL of Disbursements This Page (optional)	C. (1)	Date of Disbursement				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)  State: District:  Substotal of Disbursements This Page (optional)	Mailing Address	M M /	D D / Y Y Y Y			
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Substotal of Disbursements This Page (optional)	City	State Zip Code				
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substruct: Memo Item  600.00	Purpose of Disbursement					
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SOBTOTAL OF DISDUISEMENTS THIS Tage (Optional)	CURTOTAL of Dishurasments This Bone (actions)		<u> </u>		600.00	
	SUBTUTAL of Disbursements This Page (optional)		·····			

	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 27	
or	y information copied from such Reports and Statem for commercial purposes, other than using the nam	nents may not be sold or used e and address of any politica	d by any perso	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Charter Schools Action PAC			
۹.	Full Name (Last, First, Middle Initial)  Tenn Political Action Committee Ind	C.		Date of Disbursement
	Mailing Address 228 S. Washington Street Suite 115			02 22 2016
	Alexandria	State Zip Code VA 22314		Transaction ID : SB23.4128
	Purpose of Disbursement Contribution Candidate Name		Category/	Amount of Each Disbursement this Period
		nent For: Primary General Other (specify)	Type	5000.00 Memo Item
	Full Name (Last, First, Middle Initial)			Date of Disbursement
	Mailing Address			
	City	State Zip Code		
	Purpose of Disbursement			Amount of Each Disbursement this Period
	Candidate Name		Category/ Type	
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Э.				Date of Disbursement
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