

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Campus Red PAC

Report Covering the Period:

From: 07/01/2016

To: 09/30/2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>0,00</u>		
(b) Cash on Hand at Beginning of Reporting Period.....	<u>10,500.00</u>	<u>u</u>
(c) Total Receipts (from Line 19).....	<u>57,741.83</u>	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>68,241.83</u>	
7. Total Disbursements (from Line 31).....	<u>23,062.44</u>	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>45,179.39</u>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0.00</u>	

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

2016-09-30 10:00:00 AM

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Campus Red PAC

Report Covering the Period:

From: 07/01/2016

To:

09/30/2016

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	54,090.00	64,590.00
(ii) Unitemized.....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		
(b) Political Party Committees.....	1,000.00	1,000.00
(c) Other Political Committees (such as PACs).....	2,550.00	2,550.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	57,640.00	68,140.00
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....	101.83	101.83
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	57,741.83	68,241.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶		

NON-FEDERAL AND LEVIN FUNDS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	11,531.22	/
(ii) Non-Federal Share.....	11,531.22	
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	23,062.44	
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements (Including Non-Federal Donations).....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	23,062.44	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11,531.22	

NON-FEDERAL DONATIONS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	57,640.00	" "
34. Total Contribution Refunds (from Line 28(d))	0.00	
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57,640.00	
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	23,062.44	
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	
38. Net Operating Expenditures (subtract Line 37 from Line 36)	23,062.44	

2019-10-28 PM 00:14:20

**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	OF	9
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)
Campus Red PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. United In Purpose, Inc (c4)		Date of Receipt 06/30/16
Mailing Address 2995 Woodside Rd, Suite 400B		Amount of Each Receipt this Period 10,000.00
City Woodside	State CA Zip Code 94062	
FEC ID number of contributing federal political committee. C		Memo Item Check not recieved until 07/04
Name of Employer (for Individual)		
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 10,000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. United In Purpose, Inc (c4)		Date of Receipt 08/05/16
Mailing Address 2995 Woodside Rd. Suite 400B		Amount of Each Receipt this Period 5,000.00
City Woodside	State CA Zip Code 94062	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer (for Individual)		
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 15,000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Timothy Partners, Ltd.		Date of Receipt 09/13/16
Mailing Address 1055 Maitland Center Commons		Amount of Each Receipt this Period 2,000.00
City Maitland	State FL Zip Code 32751	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer (for Individual)		
Occupation (for Individual)		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 2,000.00	

SUBTOTAL of Receipts This Page (optional).....▶	17,000.00
TOTAL This Period (last page this line number only).....▶	

2016-10-20 10:00:00 AM

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

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

FOR LINE NUMBER: PAGE 2 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Grossman, Mel

Mailing Address

City State Zip Code
 City **FL** Zip Code

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

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 Other (specify) ▼ **60.00**

Date of Receipt
07/08/16

Amount of Each Receipt this Period
60.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vaandering, Kelly, E.

Mailing Address
2855 W. University Drive

City State Zip Code
 City **FL** Zip Code **33065**

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

Name of Employer (for Individual) Occupation (for Individual)
M&I Insurance Agency, Inc. Owner

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 Other (specify) ▼ **250.00**

Date of Receipt
07/20/16

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McCall, Terry

Mailing Address
10131 W Oakland Park Blvd.

City State Zip Code
 City **FL** Zip Code **33351**

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

Name of Employer (for Individual) Occupation (for Individual)
State Farm Agent

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 Other (specify) ▼ **500.00**

Date of Receipt
07/25/16

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **810.00**

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

NOTHING TO REPORT

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE <u>3</u> OF <u>19</u>							
	<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

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NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <u>Brickman, Guy</u>			Date of Receipt <u>07/25/16</u>
Mailing Address <u>16969 NW 67th Ave.</u>			Amount of Each Receipt this Period <u>500.00</u>
City <u>Miami</u>	State <u>FL</u>	Zip Code <u>33015</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>State Farm</u>		Occupation (for Individual) <u>Agent</u>	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ <u>500.00</u>	

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <u>Alembik, Steven</u>			Date of Receipt <u>07/27/15</u>
Mailing Address <u>5584 Arbor Club Way</u>			Amount of Each Receipt this Period <u>250.00</u>
City <u>Boca Raton</u>	State <u>FL</u>	Zip Code <u>33433</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>SMA Communications</u>		Occupation (for Individual) <u>Founder</u>	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ <u>250.00</u>	

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <u>Merlin, William</u>			Date of Receipt <u>07/27/16</u>
Mailing Address <u>777 South Harbour Island Blvd.</u>			Amount of Each Receipt this Period <u>5,000.00</u>
City <u>Tampa</u>	State <u>FL</u>	Zip Code <u>33602</u>	
FEC ID number of contributing federal political committee. <u>C</u>			Memo Item
Name of Employer (for Individual) <u>Merlin Law Group</u>		Occupation (for Individual) <u>Attorney</u>	
Receipt For: Primary General Other (specify)		Aggregate Year-to-Date ▼ <u>5,000.00</u>	

SUBTOTAL of Receipts This Page (optional).....▶	<u>5,750.00</u>
TOTAL This Period (last page this line number only).....▶	

2016-10-20 10:00 AM

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

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

FOR LINE NUMBER: PAGE 5 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Cato, Daniel

Mailing Address
 600 W Tropical Way

City
 Plantation

State
 FL

Zip Code
 33317

Date of Receipt
 08/06/16

Amount of Each Receipt this Period
 250.00

FEC ID number of contributing federal political committee.
 C

Name of Employer (for Individual)
 State Farm

Occupation (for Individual)
 Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Valerio, Michael

Mailing Address
 PO BOX 2350

City
 Acton

State
 MA

Zip Code
 01720

Date of Receipt
 08/10/16

Amount of Each Receipt this Period
 3,000.00

FEC ID number of contributing federal political committee.
 C

Name of Employer (for Individual)
 n/a

Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 3,000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Meehan, John, E

Mailing Address
 3229 Mariner Way

City
 Lake Worth

State
 FL

Zip Code
 33462

Date of Receipt
 08/14/16

Amount of Each Receipt this Period
 50.00

FEC ID number of contributing federal political committee.
 C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3,300.00

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

2016-10-28 10:00:00 AM

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 **19**
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
D'Mara, Rosemary

Mailing Address
768 Jeffrey St.

City **Boca Raton** State **FL** Zip Code **33487**

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

Name of Employer (for Individual) **Elite Cleaners** Occupation (for Individual) **Manager**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **200.00**

Date of Receipt **08/16/16**

Amount of Each Receipt this Period **200.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Kaufman, Joyce

Mailing Address
2305 Lucaya Lane M2

City **Coconut Creek** State **FL** Zip Code **33066**

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

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

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **50.00**

Date of Receipt **08/16/16**

Amount of Each Receipt this Period **50.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Germaine, William

Mailing Address
43 South Pompano Parkway

City **Pompano Beach** State **FL** Zip Code **33069**

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

Name of Employer (for Individual) **Total Travel and Tickets** Occupation (for Individual) **owner**

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **1,000.00**

Date of Receipt **08/18/16**

Amount of Each Receipt this Period **1,000.00**

Memo Item

SUBTOTAL of Receipts This Page (optional) **1,250.00**

TOTAL This Period (last page this line number only)

2016-10-28 10:00 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 19	
	(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"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wrenn, Willis			Date of Receipt 08/25/16
Mailing Address 3410 Aladdin Way			Amount of Each Receipt this Period 200.00
City Pompano Beach	State FL	Zip Code 33069	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual) Publix		Occupation (for Individual)	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Matheny, Kristin, G.			Date of Receipt 08/25/16
Mailing Address 4270 Laurel Ridge Circle			Amount of Each Receipt this Period 80.00
City Weston	State FL	Zip Code 33331	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual) Student	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 80.00	

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Stolar, Kenneth, H.			Date of Receipt 08/25/16
Mailing Address 806 NE 5th Ave			Amount of Each Receipt this Period 50.00
City Pompano Beach	State FL	Zip Code 33060	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual) Service Corporation International		Occupation (for Individual) Seminar Specialist	
Receipt For: Primary General Other (specify)		Aggregate Year-to-Date ▼ 50.00	

SUBTOTAL of Receipts This Page (optional).....	330.00
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: PAGE 9 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Campus Red PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. <u>Gillies, Connie</u>		Date of Receipt <u>08/26/16</u>
Mailing Address <u>22946 Oxford Place C.</u>		Amount of Each Receipt this Period <u>50.00</u>
City <u>Boca Raton</u>	State <u>FL</u>	
Zip Code <u>33433</u>		Memo Item
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ <u>50.00</u>
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. <u>Mears, Stuart, W.</u>		Date of Receipt <u>08/26/16</u>
Mailing Address <u>2590 Cooper Way</u>		Amount of Each Receipt this Period <u>100.00</u>
City <u>Wellington</u>	State <u>FL</u>	
Zip Code <u>33414</u>		Memo Item
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ <u>100.00</u>
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. <u>Musser, Paul</u>		Date of Receipt <u>08/26/16</u>
Mailing Address <u>15820 Sedgewyck Cir. N</u>		Amount of Each Receipt this Period <u>100.00</u>
City <u>Davie</u>	State <u>FL</u>	
Zip Code <u>33331</u>		Memo Item
FEC ID number of contributing federal political committee. <u>C</u>		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ <u>100.00</u>
Occupation (for Individual)		
Receipt For: Primary General Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	▶ <u>250.00</u>
TOTAL This Period (last page this line number only).....	▶

20160810 10:00:00 AM

**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 2 OF 19	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Campos Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wilson, Carole, A.K.			Date of Receipt 08/26/16
Mailing Address 501 SW 11th Pl. Ste. 113B			Amount of Each Receipt this Period 50.00
City Boca Raton	State FL	Zip Code 33432	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Budd, Joseph, E.			Date of Receipt 08/26/16
Mailing Address 721 NE 69th St			Amount of Each Receipt this Period 100.00
City Boca Raton	State FL	Zip Code 33487	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Tomlinson, Robert, E.			Date of Receipt 08/26/16
Mailing Address 2150 NE 65th Ct.			Amount of Each Receipt this Period 80.00
City Ft. Lauderdale	State FL	Zip Code 33308	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 80.00		

SUBTOTAL of Receipts This Page (optional).....	230.00
TOTAL This Period (last page this line number only).....	

2016-10-28 00:14:41

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

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

FOR LINE NUMBER: PAGE 13 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
 Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Cooley, David, L.
 Mailing Address
 6331 NE 20 Way
 City Ft. Lauderdale State FL Zip Code 33308
 Date of Receipt 08/26/16
 Amount of Each Receipt this Period 130.00
 Memo Item
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 130.00

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Garcia-Mendoza, Teresita, M.
 Mailing Address
 3051 NE 47th Ct. Apt 308
 City Ft. Lauderdale State FL Zip Code 33308
 Date of Receipt 08/26/16
 Amount of Each Receipt this Period 50.00
 Memo Item
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 50.00

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Feaman, Peter, M.
 Mailing Address
 3695 W Boynton Beach Blvd. Suite 9
 City Boynton Beach State FL Zip Code 33436
 Date of Receipt 08/26/16
 Amount of Each Receipt this Period 100.00
 Memo Item
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 280.00
TOTAL This Period (last page this line number only)..... ▶

2014-10-01 09:01:00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 OF 19			
	(check only one)			
<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

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)
Campus Red PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gillies, John		Date of Receipt 08/27/16
Mailing Address PO BOX 1254		Amount of Each Receipt this Period 50.00
City Pompano Beach	State FL	
Zip Code 33061		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ 50.00
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Rump, Dolly, T.		Date of Receipt 08/30/16
Mailing Address 12437 SW 1st Street		Amount of Each Receipt this Period 80.00
City Coral Springs	State FL	
Zip Code 33071		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ 80.00
Occupation (for Individual)		
Receipt For: Primary General Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dunlap, Mary, A.		Date of Receipt 09/09/16
Mailing Address 506 Monterey Oaks Dr.		Amount of Each Receipt this Period 200.00
City Richmond	State TX	
Zip Code 77469		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Aggregate Year-to-Date ▼ 200.00
Occupation (for Individual)		
Receipt For: Primary General Other (specify)		

SUBTOTAL of Receipts This Page (optional)..... ▶	330.00
TOTAL This Period (last page this line number only)..... ▶	

20160910 10:00:01 AM 00143031

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

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

FOR LINE NUMBER:		PAGE 15 OF 19	
<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)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Samuelson, Dorothy, L.			Date of Receipt 09/09/16
Mailing Address 4 Pleasant Point Rd.			Amount of Each Receipt this Period 50.00
City Windham	State ME	Zip Code 04062	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00	

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lewis, Vernon, B.			Date of Receipt 09/13/16
Mailing Address 2660 E. End Blvd. S. STE 116			Amount of Each Receipt this Period 5,000.00
City Marshall	State TX	Zip Code 75672	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual) retired	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 5,000.00	

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Wolak, Kirk			Date of Receipt 09/14/16
Mailing Address 278 NW 48th Ave			Amount of Each Receipt this Period 80.00
City Deerfield Beach	State FL	Zip Code 33442	
FEC ID number of contributing federal political committee. C			Memo Item
Name of Employer (for Individual)		Occupation (for Individual)	
Receipt For: Primary General Other (specify)		Aggregate Year-to-Date ▼ 80.00	

SUBTOTAL of Receipts This Page (optional).....▶	5,130.00
TOTAL This Period (last page this line number only).....▶	

20161010280100114844

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

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

FOR LINE NUMBER: PAGE 16 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Sugumete, Dennis

Mailing Address
14249 Spy Glass Hill Cr.

City Chesterfield State VA Zip Code 23832

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 50.00

Date of Receipt
09/19/16

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date

Date of Receipt _____

Amount of Each Receipt this Period _____

Memo Item

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

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date

Date of Receipt _____

Amount of Each Receipt this Period _____

Memo Item

SUBTOTAL of Receipts This Page (optional)..... 50.00

TOTAL This Period (last page this line number only)..... 54,090.00

NOV 10 10 00 AM '16

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

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

FOR LINE NUMBER: PAGE 7 OF 19
(check only one)

<input type="checkbox"/> 11a	<input checked="" 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
------------------------------	---	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Republican Party of PBC

Date of Receipt
08/19/16

Mailing Address
1555 Palm Beach Lakes Blvd. # 210

City: West Palm Beach State: FL Zip Code: 33401

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

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

Memo Item

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼
1,000.00

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

Date of Receipt

Mailing Address

City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

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

Memo Item

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

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

Date of Receipt

Mailing Address

City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. C

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

Memo Item

Receipt For:
Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional).....	▶ 1,000.00
TOTAL This Period (last page this line number only).....	▶ 1,000.00

20161010 10:28:01 AM 0001100070

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

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

FOR LINE NUMBER: PAGE 18 OF 19

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

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)
Campus Red PAC

A. Friends of Mark Foley

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

Mailing Address: 1316 Lake Victoria Dr.

City: Lake Worth State: FL Zip Code: 33461

FEC ID number of contributing federal political committee: C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2,500.00

Date of Receipt: 08/06/16

Amount of Each Receipt this Period: 2,500.00

Memo Item:

B. McGee for Congress 2016

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

Mailing Address: 2850 N Andrews Ave

City: Wilton Manors State: FL Zip Code: 33311

FEC ID number of contributing federal political committee: C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00

Date of Receipt: 08/26/16

Amount of Each Receipt this Period: 50.00

Memo Item:

C.

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

Mailing Address:

City: State: Zip Code:

FEC ID number of contributing federal political committee: C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼

Date of Receipt:

Amount of Each Receipt this Period:

Memo Item:

SUBTOTAL of Receipts This Page (optional).....▶ 2,550.00

TOTAL This Period (last page this line number only).....▶ 2,550.00

20160101028001144847

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

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

FOR LINE NUMBER: PAGE 19 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wells Fargo

Mailing Address
255 S County Rd.

City Palm Beach State FL Zip Code 33480

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
100.00

Date of Receipt
07/06/16

Amount of Each Receipt this Period
100.00

Memo Item
Bonus promotion

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wells Fargo

Mailing Address
255 S County Rd.

City Palm Beach State FL Zip Code 33480

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
101.83

Date of Receipt
09/30/16

Amount of Each Receipt this Period
1.83

Memo Item
interest

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. C

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

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 101.83

TOTAL This Period (last page this line number only)..... ▶ 101.83

2016-10-20 10:00:14 8488

**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)						PAGE	OF
	<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 type="checkbox"/> 29	<input type="checkbox"/> 30b			

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)

A.				Date of Disbursement	
Full Name (Last, First, Middle Initial)					
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement				Category/ Type	FEC Identification Number
Candidate Name					C
Office Sought: House Senate President		Disbursement For: Primary General Other (specify) ▼		Amount of Each Disbursement this Period	
State:	District:			Memo Item	
B.				Date of Disbursement	
Full Name (Last, First, Middle Initial)					
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement				Category/ Type	FEC Identification Number
Candidate Name					C
Office Sought: House Senate President		Disbursement For: Primary General Other (specify)		Amount of Each Disbursement this Period	
State:	District:			Memo Item	
C.				Date of Disbursement	
Full Name (Last, First, Middle Initial)					
Mailing Address					
City		State	Zip Code		
Purpose of Disbursement				Category/ Type	FEC Identification Number
Candidate Name					C
Office Sought: House Senate President		Disbursement For: Primary General Other (specify) ▼		Amount of Each Disbursement this Period	
State:	District:			Memo Item	

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

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

2016 RELEASE UNDER E.O. 13526

SCHEDULE C (FEC Form 3X)
LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	FOR LINE 13 OF FORM 3X	

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)			Memo Item	Election: Primary General Other (specify) ▼
Mailing Address				
City	State	ZIP Code		

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
-------------------------	----------------------------	---

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
			% (apr)	Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶
TOTALS This Period (last page in this line only)..... ▶
Carry outstanding balance only to LINE 3, Schedule D , for this line. If no Schedule D, carry forward to appropriate line of Summary.

20161010 10:00:00 AM 001-001-170000

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):	
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)..... ▶
- 2) **TOTALS** This Period (last page this line number only)..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

2016-10-28 10:00 AM

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE	OF
FOR LINE 24 OF FORM 3X	

NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼ C
-----------------------------	----------------------------------

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation
Name of Federal Candidate:	Support Oppose	Office Sought: House District: _____ President Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify) ► _____

Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation
Name of Federal Candidate:	Support Oppose	Office Sought: House District: _____ President Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify) ► _____

(a) **SUBTOTAL** of Itemized Independent Expenditures ►

(a) **SUBTOTAL** of Unitemized Independent Expenditures ►

(a) **TOTAL** Independent Expenditures ►

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date _____

2016-10-10 10:00 AM EDT

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full)					
Has your committee been designated to make coordinated expenditures by a political party committee? YES NO			Full Name of Subordinate Committee		
If YES, name the designating committee:			Mailing Address		
City		State	ZIP Code		
Full Name (Last, First, Middle Initial) of Each Payee			Memo Item	Purpose of Expenditure	Category/ Type
Mailing Address				Date	
City		State	Zip Code		
Name of Federal Candidate Supported		Office Sought:	House Senate Presidential	State: _____ District: _____	Amount
Aggregate General Election Expenditure for this Candidate ▶					
Full Name (Last, First, Middle Initial) of Each Payee			Memo Item	Purpose of Expenditure	Category/ Type
Mailing Address				Date	
City		State	Zip Code		
Name of Federal Candidate Supported		Office Sought:	House Senate Presidential	State: _____ District: _____	Amount
Aggregate General Election Expenditure for this Candidate ▶					
Full Name (Last, First, Middle Initial) of Each Payee			Memo Item	Purpose of Expenditure	Category/ Type
Mailing Address				Date	
City		State	Zip Code		
Name of Federal Candidate Supported		Office Sought:	House Senate Presidential	State: _____ District: _____	Amount
Aggregate General Election Expenditure for this Candidate ▶					
SUBTOTAL of Expenditures This Page (optional).....▶					
TOTAL This Period (last page this line number only).....▶					

NOT TO BE REPRODUCED WITHOUT PERMISSION

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Campus Red PAC

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Indicate ratio below

Federal..... %
Nonfederal..... %

This ratio applies to (check all that apply):

Administrative Generic Voter Drive Public Communications Referencing Party Only

20161010100000100011200000

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

PAGE OF

NAME OF COMMITTEE (In Full)

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity. **For PACs Only:** Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>
<p>ACTIVITY OR EVENT IDENTIFIER</p> <hr/> <p>ACTIVITY IS: <input type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support</p> <p>CHECK IF THE RATIO IS: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported</p>	<p>FEDERAL %</p>	<p>NONFEDERAL %</p>

2016-10-28 09:00:00

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE	OF
FOR LINE 18a OF FORM 3X	

NAME OF COMMITTEE (In Full)

NAME OF ACCOUNT

DATE OF RECEIPT

TOTAL AMOUNT TRANSFERRED

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative**

ii) **Generic Voter Drive**

iii) **Exempt Activities**

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) _____

b) _____

c) **Total Amount Transferred For Direct Fundraising**

v) **Direct Candidate Support** (List Activity or Event Identifier)

a) _____

b) _____

c) **Total Amount Transferred For Direct Candidate Support**

vi) **Public Communications Referring Only to Party** (Made by PAC)

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)

TOTAL This Period (Generic Voter Drive)

TOTAL This Period (Exempt Activities)

TOTAL This Period (Direct Fundraising)

TOTAL This Period (Direct Candidate Support)

TOTAL This Period (Public Communications Referring Only to Party)

TOTAL This Period (Total Amount Transferred)

NON-FEDERAL ACCOUNTS

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial)

Fiverr Inc.

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

401 Broadway Ste 1600

City

New York

State

NY

Zip Code

10013

Purpose of Disbursement:

logo vector file

Activity or Event Identifier:

[Empty box for Category/Type]

Category/Type

Allocated Activity or Event Year-To-Date

[6.00]

Date

08 / 04 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

[3.00]

[3.00]

[6.00]

B. Full Name (Last, First, Middle Initial)

Jaybird's Restaurant & Pizzeria

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

2600 N Ponce de Leon Blvd.

City

St. Augustine

State

FL

Zip Code

32084

Purpose of Disbursement:

lunch for volunteers

Activity or Event Identifier:

[Empty box for Category/Type]

Category/Type

Allocated Activity or Event Year-To-Date

[440.56]

Date

08 / 19 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

[220.28]

[220.28]

[440.56]

C. Full Name (Last, First, Middle Initial)

Beaches at Vilano

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

254 Vilano Rd

City

St. Augustine.

State

FL

Zip Code

32084

Purpose of Disbursement:

dinner for volunteers

Activity or Event Identifier:

[Empty box for Category/Type]

Category/Type

Allocated Activity or Event Year-To-Date

[500.00]

Date

08 / 19 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

[250.00]

[250.00]

[500.00]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

[473.28]

[473.28]

[946.56]

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

[Empty]

[Empty]

[Empty]

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
 Hampton Inn Administrative Fundraising Exempt
 Mailing Address: 2050 N Ponce De Leon Blvd Voter Drive Direct Candidate Support
 City: St. Augustine State: FL Zip Code: 32084 Public Comm (ref to party only) by PAC
 Purpose of Disbursement: hotel for volunteer training
 Activity or Event Identifier:
 Allocated Activity or Event Year-To-Date: 204,43
 Date: M M / D D / Y Y Y Y Y
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 102,22 + 102,21 = 204,43

B. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
 Club Corp - Tower Club Ft. Lauderdale Administrative Fundraising Exempt
 Mailing Address: 100 SE 3 Ave Voter Drive Direct Candidate Support
 City: Fort Lauderdale State: FL Zip Code: 33394 Public Comm (ref to party only) by PAC
 Purpose of Disbursement: event room rental fee
 Activity or Event Identifier:
 Allocated Activity or Event Year-To-Date: 1,081.14
 Date: M M / D D / Y Y Y Y Y
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 540.57 + 540.57 = 1,081.14

C. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
~~cr...~~ Marsh, Cade Administrative Fundraising Exempt
 Mailing Address: 1505 Tropical Drive Voter Drive Direct Candidate Support
 City: Lake Worth State: FL Zip Code: 33460 Public Comm (ref to party only) by PAC
 Purpose of Disbursement: retainer for August
 Activity or Event Identifier:
 Allocated Activity or Event Year-To-Date: 2,000.00
 Date: M M / D D / Y Y Y Y Y
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 1,000.00 + 1,000.00 = 2,000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1,642.78		1,642.79		3,285.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

2016-10-28 10:00:00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item Allocated Activity or Event:

Lauren A. Cooley Administrative Fundraising Exempt

Mailing Address 6301 NE 20 way Voter Drive Direct Candidate Support

City Fort Lauderdale State FL Zip Code 33308 Public Comm (ref to party only) by PAC

Purpose of Disbursement: retainer for August Allocated Activity or Event Year-To-Date 2,000.00

Activity or Event Identifier: Date 08 / 29 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<u>1,000.00</u>		<u>1,000.00</u>		<u>2,000.00</u>

B. Full Name (Last, First, Middle Initial) Memo Item Allocated Activity or Event:

Jet Blue Administrative Fundraising Exempt

Mailing Address 27-01 Queens Plaza North Voter Drive Direct Candidate Support

City Long Island City State NY Zip Code 1101 Public Comm (ref to party only) by PAC

Purpose of Disbursement: flight Allocated Activity or Event Year-To-Date 2,042.00

Activity or Event Identifier: Date 08 / 30 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<u>1,022.10</u>		<u>1,022.10</u>		<u>2,042.20</u>

C. Full Name (Last, First, Middle Initial) Memo Item Allocated Activity or Event:

Nick and Johnnie's Administrative Fundraising Exempt

Mailing Address 207 Royal Poinciana Way Voter Drive Direct Candidate Support

City Palm Beach State FL Zip Code 33480 Public Comm (ref to party only) by PAC

Purpose of Disbursement: administrative lunch Allocated Activity or Event Year-To-Date 714.8

Activity or Event Identifier: Date 08 / 30 / 2016

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<u>357.4</u>		<u>357.4</u>		<u>714.8</u>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<u>1,137.84</u>		<u>1,137.84</u>		<u>2,275.68</u>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2016-10-03 10:00:00

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item
~~W. ...~~ **Marathon Petro West Palm Beach**
 Mailing Address: **539 South Main St.**
 City: **Findlay** State: **OH** Zip Code: **45840**
 Purpose of Disbursement: **gas**
 Activity or Event Identifier:
 Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date:
 Date: **08 / 30 / 2016**
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 15.54 + **15.54** = **31.08**

B. Full Name (Last, First, Middle Initial) Memo Item
Hilton Orlando Convention Center
 Mailing Address: **6001 Destination Parkway**
 City: **Orlando** State: **FL** Zip Code: **32819**
 Purpose of Disbursement: **lodging**
 Activity or Event Identifier:
 Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date:
 Date: **09 / 03 / 2016**
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 97.38 + **97.38** = **194.76**

C. Full Name (Last, First, Middle Initial) Memo Item
Cooley, Lauren, A.
 Mailing Address: **6331 NE 20 way**
 City: **Ft. Lauderdale** State: **FL** Zip Code: **33308**
 Purpose of Disbursement: **retainer for September**
 Activity or Event Identifier:
 Allocated Activity or Event:
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC
 Allocated Activity or Event Year-To-Date:
 Date: **09 / 04 / 2016**
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 1,000.00 + **1,000.00** = **2,000.00**

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
 FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 1,112.92 + **1,112.92** = **2,225.84**

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
 FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

20161028 010014891

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
Marsh, Cade Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
1505 Tropical Drive Public Comm (ref to party only) by PAC
City Lake Worth **State** FL **Zip Code** 33460
Purpose of Disbursement: retainer for September
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date
 2000.00
Date 09 / 04 / 2016
FEDERAL SHARE + **NONFEDERAL SHARE** = **TOTAL AMOUNT**
 1000.00 1000.00 = 2000.00

B. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
Cooley, Lauren, A. Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
6331 NE 20 way Public Comm (ref to party only) by PAC
City Ft. Lauderdale **State** FL **Zip Code** 33308
Purpose of Disbursement: reimbursements
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date
 4331.47
Date 09 / 04 / 2016
FEDERAL SHARE + **NONFEDERAL SHARE** = **TOTAL AMOUNT**
 2165.73 2165.74 = 4331.47

C. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
Marsh, Cade Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
1505 Tropical Drive Public Comm (ref to party only) by PAC
City Lake Worth **State** FL **Zip Code** 33460
Purpose of Disbursement: reimbursements
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date
 5971.29
Date 09 / 04 / 2016
FEDERAL SHARE + **NONFEDERAL SHARE** = **TOTAL AMOUNT**
 2985.73 2985.74 = 5971.47

SUBTOTAL of Allocated Federal and NonFederal Activity This Page
FEDERAL SHARE + **NONFEDERAL SHARE** = **TOTAL AMOUNT**
 12302.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))
FEDERAL SHARE **NONFEDERAL SHARE** **TOTAL AMOUNT**

201610280300114892

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item

Lockhart, Karis

Mailing Address

417 Lake Blvd.

City

Sanford

State

FL

Zip Code

32773

Purpose of Disbursement:

independent contract

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:

Administrative Fundraising Exempt

Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

250.00

Date

09 / 12 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

125.00

125.00

250.00

B. Full Name (Last, First, Middle Initial) Memo Item

Chase, Corrie

Mailing Address

451 Haveloc Cove

City

Oviedo

State

FL

Zip Code

32765

Purpose of Disbursement:

independent contract

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:

Administrative Fundraising Exempt

Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

250.00

Date

09 / 12 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

125.00

125.00

250.00

C. Full Name (Last, First, Middle Initial) Memo Item

Pacheco, Priscilla

Mailing Address

20261 Huffmaster Rd.

City

Ft. Myers

State

FL

Zip Code

33917

Purpose of Disbursement:

independent contract

Activity or Event Identifier:

Category/Type

Allocated Activity or Event:

Administrative Fundraising Exempt

Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

250.00

Date

09 / 12 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

125.00

125.00

250.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

375.00

375.00

750.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

20161028030014864

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
University of Central Florida College Republicans Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
4000 Central Florida Blvd Public Comm (ref to party only) by PAC
City **Orlando** **State** **FL** **Zip Code** **32816**
Purpose of Disbursement: **voter registration efforts**
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date **100.00**
Date **09/12/2016**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
50.00		50.00		100.00

B. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
Pollo Tropical - West Palm Beach Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
7300 Kendall Dr. Public Comm (ref to party only) by PAC
City **Miami** **State** **FL** **Zip Code** **33156**
Purpose of Disbursement: **feeding of volunteers**
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date **183.1**
Date **09/12/2016**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.15		9.16		18.31

C. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
Harland Clarke Administrative Fundraising Exempt
Mailing Address Voter Drive Direct Candidate Support
2939 Miller Rd. Public Comm (ref to party only) by PAC
City **Decatur** **State** **GA** **Zip Code** **30035**
Purpose of Disbursement: **Checks**
Activity or Event Identifier:
Allocated Activity or Event Year-To-Date **111.39**
Date **09/13/2016**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.69		55.70		111.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
114.85		114.85		229.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

2016-10-20 10:00:00

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial)

Amedot

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

PO BOX 84314

City

Baton Rouge

State

LA

Zip Code

70884

Purpose of Disbursement:

online donations fee

Activity or Event Identifier:

[Empty Box]

Category/Type

Allocated Activity or Event Year-To-Date

3,280.02

Date

09 / 14 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1,640.1

1,640.1

3,280.2

B. Full Name (Last, First, Middle Initial)

Exxon Mobile - Port Charlotte

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

5959 Las Colinas Blvd.

City

Irving

State

Tx

Zip Code

75039

Purpose of Disbursement:

gas

Activity or Event Identifier:

[Empty Box]

Category/Type

Allocated Activity or Event Year-To-Date

257.4

Date

09 / 15 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1,288.7

1,288.7

2,577.4

C. Full Name (Last, First, Middle Initial)

Paypal

Memo Item

Allocated Activity or Event:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address

2211 N 1st St.

City

San Jose

State

CA

Zip Code

95131

Purpose of Disbursement:

online donations fee

Activity or Event Identifier:

[Empty Box]

Category/Type

Allocated Activity or Event Year-To-Date

255.7

Date

09 / 17 / 2016

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1,279

1,278

2,557

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3,056.7

3,056.6

3,993.3

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

[Empty Box]

[Empty Box]

[Empty Box]

20161010 10:01:01 00117899

SCHEDULE H4 (FEC Form 3X)
DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)

Campus Red PAC

A. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address: EDCO Awards & special hrs
City: 3702 Davie Blvd. **State:** FL **Zip Code:** 33312

Purpose of Disbursement: t-shirts
Activity or Event Identifier: [] **Category/Type:** []

Allocated Activity or Event Year-To-Date: [] 4,827.2
Date: 09 / 27 / 2016

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 [] 2,413.6 [] 2,413.6 [] 4,827.2

B. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address:
City: **State:** **Zip Code:**

Purpose of Disbursement:
Activity or Event Identifier: [] **Category/Type:** []

Allocated Activity or Event Year-To-Date: []
Date: [] / [] / []

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 [] [] []

C. Full Name (Last, First, Middle Initial) Memo Item **Allocated Activity or Event:**
 Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Mailing Address:
City: **State:** **Zip Code:**

Purpose of Disbursement:
Activity or Event Identifier: [] **Category/Type:** []

Allocated Activity or Event Year-To-Date: []
Date: [] / [] / []

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 [] [] []

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
 [] 2,413.6 [] 2,413.6 [] 4,827.2

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT
 [] 11,531.22 [] 11,531.22 [] 23,062.44

201610280114897

SCHEDULE H5 (FEC Form 3X)

**TRANSFERS OF LEVIN FUNDS RECEIVED FOR
ALLOCATED FEDERAL ELECTION ACTIVITY**

(To be used by State, District and Local Party Committees Only)

PAGE	OF
FOR LINE 18b OF FORM 3X	

NAME OF COMMITTEE (In Full)

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
-----------------	-----------------	--------------------------

BREAKDOWN OF THIS TRANSFER

i) Voter Registration	VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	
ii) Voter ID	VOTER ID
Total Amount Transferred for Voter ID.....	
iii) GOTV	GOTV
Total Amount Transferred for GOTV.....	
iv) Generic Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
-----------------	-----------------	--------------------------

BREAKDOWN OF THIS TRANSFER

i) Voter Registration	VOTER REGISTRATION
Total Amount Transferred for Voter Registration.....	
ii) Voter ID	VOTER ID
Total Amount Transferred for Voter ID.....	
iii) GOTV	GOTV
Total Amount Transferred for GOTV.....	
iv) Generic Campaign Activity	GENERIC CAMPAIGN ACTIVITY
Total Amount Transferred for Generic Campaign Activity.....	

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED (Last Page Only)	
TOTAL This Period (Voter Registration).....	
TOTAL This Period (Voter ID).....	
TOTAL This Period (GOTV).....	
TOTAL This Period (Generic Campaign Activity).....	
TOTAL This Period (Total Amount of Transfers Received).....	

20161010 10:28:01 AM 001418000

**SCHEDULE H6 (FEC Form 3X)
DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS
FOR ALLOCATED FEDERAL ELECTION ACTIVITY
(To be used by State, District and Local Party Committees Only)**

NAME OF COMMITTEE (In Full)

A. Full Name (Last, First, Middle Initial) / Full Organization Name			Memo Item	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Category/ Type	Date	
Purpose of Disbursement					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT

B. Full Name (Last, First, Middle Initial) / Full Organization Name			Memo Item	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Category/ Type	Date	
Purpose of Disbursement					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT

C. Full Name (Last, First, Middle Initial) / Full Organization Name			Memo Item	Type of Allocated Activity or Event: Voter Registration GOTV Voter ID Generic Campaign	
Mailing Address			Allocated Activity or Event Year-To-Date		
City	State	Zip Code	Category/ Type	Date	
Purpose of Disbursement					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT

SUBTOTAL of Shared Federal and Levin Activity This Page					
FEDERAL SHARE		+	LEVIN SHARE		= TOTAL AMOUNT
TOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Levin share to 30(a)(ii))					
FEDERAL SHARE			LEVIN SHARE		TOTAL AMOUNT
TOTAL This Period for the Levin Share					

20161010 10:28 AM 001148899

SCHEDULE L (FEC Form 3X)
AGGREGATION PAGE: LEVIN FUNDS

NAME OF COMMITTEE (In Full)
NAME OF ACCOUNT

	COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE
1. RECEIPTS FROM PERSONS		
(a) Itemized (Use Schedule L-A)		
(b) Unitemized		
(c) Total		
2. OTHER RECEIPTS		
3. TOTAL RECEIPTS		
(Add Lines 1c and 2)		
4. TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		
(a) Voter Registration		
(b) Voter ID		
(c) GOTV		
(d) Generic Campaign		
(e) Total		
5. OTHER DISBURSEMENTS		
6. TOTAL DISBURSEMENTS		
(Add Lines 4e and 5)		
7. BEGINNING CASH ON HAND		
(for Column B, use cash as of January 1st)		
8. RECEIPTS		
(from Line 3)		
9. SUBTOTAL		
(Add Lines 7 and 8)		
10. DISBURSEMENTS		
(From Line 6)		
11. ENDING CASH ON HAND		
(Subtract Line 10 From Line 9)		

20160110 10:01:00 AM

**SCHEDULE L-B (FEC Form 3X)
ITEMIZED DISBURSEMENTS
OF LEVIN FUNDS**

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

FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 4a	<input type="checkbox"/> 4c	<input type="checkbox"/> 5
<input type="checkbox"/> 4b	<input type="checkbox"/> 4d	

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)

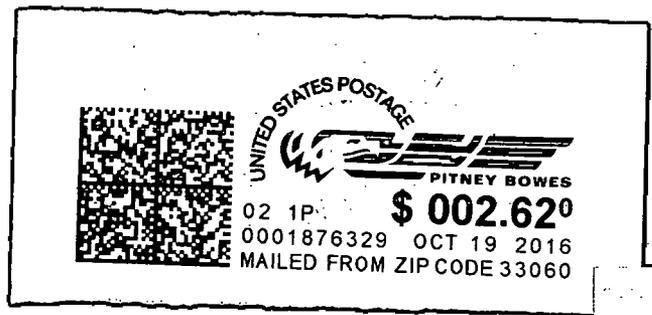
A.	Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item	Date of Disbursement
	Mailing Address		
	City	State	Zip Code
	Purpose of Disbursement		Amount of Each Disbursement this Period
B.	Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item	Date of Disbursement
	Mailing Address		
	City	State	Zip Code
	Purpose of Disbursement		Amount of Each Disbursement this Period
C.	Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item	Date of Disbursement
	Mailing Address		
	City	State	Zip Code
	Purpose of Disbursement		Amount of Each Disbursement this Period
D.	Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item	Date of Disbursement
	Mailing Address		
	City	State	Zip Code
	Purpose of Disbursement		Amount of Each Disbursement this Period
E.	Full Name (Last, First, Middle Initial) / Full Organization Name	Memo Item	Date of Disbursement
	Mailing Address		
	City	State	Zip Code
	Purpose of Disbursement		Amount of Each Disbursement this Period

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

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

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