

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER  
2016 JAN 11 AM 11:29  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

18-24

ADDRESS (number and street) 44741 EMMA LANE

Check if different than previously reported. (ACC) HOLLYWOOD MD 20636

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00523001  IS THIS REPORT NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on MM / DD / YYYY in the State of XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on MM / DD / YYYY in the State of XX

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

07 / 01 / 2015 through 12 / 31 / 2015

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

Type or Print Name of Treasurer SUSAN E. GROGAN

Signature of Treasurer Susan E. Grogan Date MM / DD / YYYY

01 / 08 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

18-24

Report Covering the Period: From:

/  /

To:

/  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="677.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1,617.94"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="9,000"/>	<input type="text" value="10,900.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1,707.94"/>	<input type="text" value="1,767.73"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1,531.76"/>	<input type="text" value="1,591.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="176.23"/>	<input type="text" value="176.23"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text"/>	

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)

Page 3

Write or Type Committee Name

18-24

Report Covering the Period: From:

M M M / D D D / Y Y Y Y  
07 / 01 / 2015

To:

M M M / D D D / Y Y Y Y  
12 / 31 / 2015

**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).....
  - (ii) Unitemized.....
  - (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶

9000  
9000

100000  
9000  
109000

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)..... ▶

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.).....

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))..... ▶

9000

109000

20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶

9000

109000

NON-FEDERAL CONTRIBUTIONS

**DETAILED SUMMARY PAGE  
of Disbursements**

FEC Form 3X (Rev. 02/2003)

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 .....		
(ii) Non-Federal Share .....		
(b) Other Federal Operating Expenditures .....	3171	8750
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3171	8750
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 .....	1,000.00	1,000.00
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 .....		
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)) .....	1,031.71	1,087.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	1,031.71	1,087.50

NON-FEDERAL



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 <b>6</b> OF <b>10</b>
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)  
**18-24**

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

Mailing Address

City **St Mary's City** State **MD** Zip Code **20686**

Purpose of Disbursement  
**Report to FEC - postage**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **overhead weekend**

State: District:

Date of Disbursement: **07 / 01 / 2015**

Amount of Each Disbursement this Period: **4.16**

Category/Type: **001**

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

Mailing Address

City **St Mary's City** State **MD** Zip Code **20686**

Purpose of Disbursement  
**mail T-shirts: Publicity + outreach**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **outreach overhead**

State: District:

Date of Disbursement: **07 / 20 / 2015**

Amount of Each Disbursement this Period: **13.55**

Category/Type: **001**

C. Full Name (Last, First, Middle Initial)  
**PNC Bank**

Mailing Address  
**22616 Three Notch Rd**

City **Lexington Park** State **MD** Zip Code **20653**

Purpose of Disbursement  
**Bank Fee**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **overhead**

State: District:

Date of Disbursement: **07 / 01 / 2015**

Amount of Each Disbursement this Period: **2.00**

Category/Type: **001**

SUBTOTAL of Disbursements This Page (optional).....▶ **19.71**

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

20150701 10:00AM

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 7 OF 10

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

18-24

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 / 30 / 2015

A.

PNC Bank

Mailing Address

22610 Three Notch Rd

City

Lexington Park

State

MD

Zip Code

20653

Purpose of Disbursement

Bank Fee

001

Candidate Name

Amount of Each Disbursement this Period

200

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

overhead

B.

PNC Bank

Mailing Address

22610 Three Notch Rd

City

Lexington Park MD

State

20653

Zip Code

Purpose of Disbursement

Bank Fee

001

Candidate Name

Amount of Each Disbursement this Period

200

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

overhead

C.

PNC Bank

Mailing Address

22610 Three Notch Rd

City

Lexington Park MD

State

20653

Zip Code

Purpose of Disbursement

Bank Fee

001

Candidate Name

Amount of Each Disbursement this Period

200

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State:

District:

overhead

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

600

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

NON-IDENTIFYING INFORMATION

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 8 OF 10
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**18-24**

A. Full Name (Last, First, Middle Initial) <b>SUSAN E. GROGAN</b>		Date of Disbursement <b>12 / 08 / 2015</b>
Mailing Address <b>4474 Emma Lane E</b>		
City <b>Hollywood</b>	State <b>MD</b>	Zip Code <b>20636</b>
Purpose of Disbursement <b>loan repayment</b>	Candidate Name	Amount of Each Disbursement this Period <b>0091</b>
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <b>loan repayment</b>	
State:	District:	

B. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	
State:	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Of/Ace Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>1,000.00</b>
TOTAL This Period (last page this line number only).....▶	

2010-01-11 PM 00:07:44



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 <b>9</b> OF <b>10</b>
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)  
**18-2f**

A. Full Name (Last, First, Middle Initial)  
**PNC Bank**

Mailing Address  
**22610 Three Notch Rd**

City  
**Lexington Park MD** State Zip Code  
**20653**

Purpose of Disbursement  
**Bank Fee**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **overhead**

State: District:

Date of Disbursement  
**10 / 31 / 2015**

Amount of Each Disbursement this Period  
**2.00**

Category/Type  
**001**

B. Full Name (Last, First, Middle Initial)  
**PNC Bank**

Mailing Address  
**22610 Three Notch Rd**

City  
**Lexington Park MD** State Zip Code  
**20653**

Purpose of Disbursement  
**Bank Fee**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **overhead**

State: District:

Date of Disbursement  
**11 / 30 / 2015**

Amount of Each Disbursement this Period  
**2.00**

Category/Type  
**001**

C. Full Name (Last, First, Middle Initial)  
**PNC Bank**

Mailing Address  
**22610 Three Notch Rd**

City  
**Lexington Park MD** State Zip Code  
**20653**

Purpose of Disbursement  
**Bank Fee**

Candidate Name

Of/Ace Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **overhead**

State: District:

Date of Disbursement  
**12 / 31 / 2015**

Amount of Each Disbursement this Period  
**2.00**

Category/Type  
**001**

SUBTOTAL of Disbursements This Page (optional).....▶ **6.00**

TOTAL This Period (last page this line number only).....▶ **1,031.71**

2015-01-11 09:00 AM 7845

**SCHEDULE C (FEC Form 3X)**

**LOANS**

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

PAGE **10** OF **10**

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

**18-24**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**GROGAN, SUSAN E**

Election:

- Primary
- General
- Other (specify) ▼

Mailing Address

**44741 Emma Lane**

City

**Hollywood**

State **MD**

ZIP Code

**20636**

Original Amount of Loan

**1,500.00**

Cumulative Payment To Date

**1,500.00**

Balance Outstanding at Close of This Period

**0**

**TERMS**

Date Incurred

**07 / 13 / 2012**

Date Due

**MM / DD / YYYY**

Interest Rate

**0 % (apr)**

Secured:

- 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: <b>0</b>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0</b>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0</b>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <b>0</b>

**SUBTOTALS** This Period This Page (optional).....▶

**0**

**TOTALS** This Period (last page in this line only).....▶

**0**

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

2012-01-11 10:00AM

Lane

U.S. MAIL



7015 1520 0002 3424 9593

U.S. POSTAGE  
PAID  
HOLLYWOOD, MD  
20636  
JAN 08 16  
AMOUNT

\$5.31

R2305K142926-01



20463



1000

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

RECEIVED  
FED MAIL CE  
2016 JAN 11 AM

