

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

TEA PARTY MAJORITY FUND

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer

Signature of Treasurer MACKENZIE, SCOTT B, , , [Electronically Filed] Date / /

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. 05/2016)

Write or Type Committee Name

TEA PARTY MAJORITY FUND

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="2016"/>		63478.41
(b) Cash on Hand at Beginning of Reporting Period.....	78587.11	
(c) Total Receipts (from Line 19)	155333.45	1620085.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	233920.56	1683564.15
7. Total Disbursements (from Line 31).....	221683.05	1671326.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	12237.51	12237.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TEA PARTY MAJORITY FUND

Report Covering the Period: From: / / To: / /

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).....	19725.00	135681.00
(ii) Unitemized	135608.45	1480245.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	155333.45	1615926.56
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	155333.45	1615926.56
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	4159.18
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	155333.45	1620085.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	155333.45	1620085.74

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	187114.85	529102.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	187114.85	529102.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2250.00	7850.00
24. Independent Expenditures (use Schedule E)	32318.20	1134374.48
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	221683.05	1671326.64
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	221683.05	1671326.64

DETAILED SUMMARY PAGE
of Disbursements

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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)	155333.45	1615926.56
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	155333.45	1615926.56
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	187114.85	529102.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	187114.85	529102.16

**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 6 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ADAMS 366, MARGARET T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8240 HEALY DR

City MOBILE	State AL	Zip Code 36695
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2016

Transaction ID : SA11AI.60064

Amount of Each Receipt this Period
100.00

Memo Item

B. BARNETT 973, FRANK W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10000 AIRLIE RD

City MONMOUTH	State OR	Zip Code 97361
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		26		2016

Transaction ID : SA11AI.60241

Amount of Each Receipt this Period
100.00

Memo Item

C. BARTLEY 773, ROBERT C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10107 ELDERBERRY PARK LN

City TOMBALL	State TX	Zip Code 77375
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RCB INSURANCE SERVICES LLC	Occupation (for Individual) INSURANCE BROKER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

Transaction ID : SA11AI.60252

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BEHRENS 531, RICH C, , MR,

Mailing Address **2323 FOX RIVER PKWY**

City WAUKESHA	State WI	Zip Code 53189
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 16 / 2016

Transaction ID : SA11AI.60301

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELK 795, HARLEY A, , MR,

Mailing Address **6402 FM 2111**

City WINTERS	State TX	Zip Code 79567
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BELK CATTLE INC	Occupation (for Individual) CORPORATE SECRETARY
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
12 / 21 / 2016

Transaction ID : SA11AI.60309

Amount of Each Receipt this Period
200.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BENJAMIN 800, DEAN A, , MR,

Mailing Address **10118 GROVE LOOP
UNIT A**

City WESTMINSTER	State CO	Zip Code 80031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
12 / 13 / 2016

Transaction ID : SA11AI.60316

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BICE 575, DONALD L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31629 277TH ST
 City WINNER State SD Zip Code 57580
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROOTS AERIAL CROP SPRAYING SRV Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 30 / 2016
Transaction ID : SA11AI.60351
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRADLEY 774, SHARON, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 HENDERSON RANCH LN
 City BELLVILLE State TX Zip Code 77418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 12 / 01 / 2016
Transaction ID : SA11AI.60468
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BRIGGS 805, ALBERT R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1415 SYLMAR PL
 City LOVELAND State CO Zip Code 80537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.60512
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 68
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BROWN 087, LES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 BAYVIEW AVE

City BAYVILLE	State NJ	Zip Code 08721
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BERKLEY DESIGN	Occupation (for Individual) ENGINEER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2016

Transaction ID : SA11AI.60532

Amount of Each Receipt this Period
100.00

Memo Item

B. BROWN 740, SHERRIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 881

City CUSHING	State OK	Zip Code 74023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2016

Transaction ID : SA11AI.60541

Amount of Each Receipt this Period
100.00

Memo Item

C. BROWN 863, LINDA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1093 N WIDE OPEN TRL

City PRESCOTT VLY	State AZ	Zip Code 86314
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2016

Transaction ID : SA11AI.60546

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 10 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BROWNING 359, KERRY D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 LARKHAVEN DR
 City RAINBOW CITY State AL Zip Code 35906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2016
Transaction ID : SA11AI.60554
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BUCHWALD 430, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17156 GLEN RD
 City MOUNT VERNON State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11AI.60578
 Amount of Each Receipt this Period 200.00
 Memo Item

C. BUHL 100, HENRY M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 GREENE ST FL 5
 City NEW YORK State NY Zip Code 10012
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE BUHL FOUNDATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2016
Transaction ID : SA11AI.60591
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BULLOCH 945, MARGRETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 WINGFOOT ST
 City MORAGA State CA Zip Code 94556
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 19 / 2016
Transaction ID : SA11AI.60598
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BUSCH 923, EDWARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22071 HURONS AVE
 City APPLE VALLEY State CA Zip Code 92307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 29 / 2016
Transaction ID : SA11AI.60625
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BUZBY 329, SCOTT H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 W SOUTHWINDS BLVD
 City VERO BEACH State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11AI.60633
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 68
<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)
TEA PARTY MAJORITY FUND

A. CAIN 926, FLORINE, , MS,
Mailing Address 14 LAGO NORTE

City IRVINE	State CA	Zip Code 92612
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
11 / 30 / 2016
Transaction ID : SA11AI.60646

Amount of Each Receipt this Period
300.00

Memo Item

B. CALEF 523, CHARLES, , MR,
Mailing Address 2278 275TH ST

City WASHINGTON	State IA	Zip Code 52353
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00

Date of Receipt
12 / 02 / 2016
Transaction ID : SA11AI.60649

Amount of Each Receipt this Period
350.00

Memo Item

C. CALLAWAY 945, RICHARD, , MR,
Mailing Address 200 GREGORY LN

City PLEASANT HILL	State CA	Zip Code 94523
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) CALLAWAY INSURANCE CO		Occupation (for Individual) INSURANCE BROKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 30 / 2016
Transaction ID : SA11AI.60657

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
TEA PARTY MAJORITY FUND

A. CAMPBELL 191, MARIE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2026 E CUMBERLAND ST
 City PHILADELPHIA State PA Zip Code 19125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.60664
 Amount of Each Receipt this Period 75.00
 Memo Item

B. CHAFFEE 494, DAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3979 EDGEWOOD ST SW
 City GRANDVILLE State MI Zip Code 49418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SALEM COMMUNICATIONS Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 26 / 2016
Transaction ID : SA11AI.60744
 Amount of Each Receipt this Period 50.00
 Memo Item

C. CHAMBERS 298, EMILY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2023 LORRAINE DR SW
 City AIKEN State SC Zip Code 29801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2016
Transaction ID : SA11AI.60749
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CHAPMAN 170, DONALD M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 307

City LEWISTOWN	State PA	Zip Code 17044
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NITTANY PAPER MILLS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

Transaction ID : SA11AI.60751

Amount of Each Receipt this Period
200.00

Memo Item

B. CHASE 229, HARLAN, , MR, SR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 JEFFERSON GRN

City WAYNESBORO	State VA	Zip Code 22980
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2016

Transaction ID : SA11AI.60757

Amount of Each Receipt this Period
50.00

Memo Item

C. CHONKO 327, ANDREW, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 WEST LOOP

City OAK HILL	State FL	Zip Code 32759
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

Transaction ID : SA11AI.60769

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 15 OF 68
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CILLUFFO 193, ANTHONY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 518 MEADOWLARK TER

City GLEN MILLS	State PA	Zip Code 19342
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

Transaction ID : SA11AI.60786

Amount of Each Receipt this Period
400.00

Memo Item

B. COLE 923, FRED, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7920 SANTA PAULA ST

City HIGHLAND	State CA	Zip Code 92346
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COUNTY OF SAN BERNARDINO	Occupation (for Individual) ANALYST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

Transaction ID : SA11AI.60835

Amount of Each Receipt this Period
100.00

Memo Item

C. COLLINS 974, ROBERT C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3087 POWDER RIVER DR

City EUGENE	State OR	Zip Code 97408
----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) DENTIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2016

Transaction ID : SA11AI.60847

Amount of Each Receipt this Period
70.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	570.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. COLTRANE 177, LORETTA E, , MRS, JR
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016
Transaction ID : SA11AI.60848

Amount of Each Receipt this Period
 100.00

Memo Item

B. CORTEZ 850, LEILANI, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4107 E EARLL DR

City PHOENIX	State AZ	Zip Code 85018
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 23 / 2016
Transaction ID : SA11AI.60892

Amount of Each Receipt this Period
 250.00

Memo Item

C. CRAWFORD 760, ALAN M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 215 HIDDEN OAKS DR

City HUDSON OAKS	State TX	Zip Code 76087
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RANGAIRE MANAGEMENT SERVICES LLC	Occupation (for Individual) MANAGER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 20 / 2016
Transaction ID : SA11AI.60927

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CRUMB 770, CHARLES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1644 CASTLE CT
 City HOUSTON State TX Zip Code 77006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) NEPHROLOGIST
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 19 / 2016
Transaction ID : SA11AI.60953
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DAHARSH 820, MICHAEL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3400 HALES RANCH RD
 City CHEYENNE State WY Zip Code 82007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11AI.60984
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DAVIDGE 995, RIC, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3705 ARCTIC BLVD
 City ANCHORAGE State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) RESIDENTIAL CONTRACTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 02 / 2016
Transaction ID : SA11AI.61019
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 18 OF 68
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. DILL 828, WILLIAM J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 338 BIG GOOSE RD
 City SHERIDAN State WY Zip Code 82801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 14 / 2016
Transaction ID : SA11AI.61124
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DODGE 722, LINNIE M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14300 CHENAL PKWY APT 7010
 City LITTLE ROCK State AR Zip Code 72211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 02 / 2016
Transaction ID : SA11AI.61144
 Amount of Each Receipt this Period 200.00
 Memo Item

C. DONOVAN 852, JOHN F, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7508 E MINNEZONA AVE
 City SCOTTSDALE State AZ Zip Code 85251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 01 / 2016
Transaction ID : SA11AI.61154
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 19 OF 68
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. DOUGHERTY 325, RICHARD P, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1028 STEPHEN DR

City NICEVILLE	State FL	Zip Code 32578
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

Transaction ID : SA11AI.61169

Amount of Each Receipt this Period
200.00

Memo Item

B. DOUGLASS 652, TOM M, , Mr,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 W BRANDON RD

City COLUMIA	State MO	Zip Code 65203
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2016

Transaction ID : SA11AI.61178

Amount of Each Receipt this Period
250.00

Memo Item

C. DRUEKE 370, CLAUDINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8239 HAWKINS RD

City COLLEGE GROVE	State TN	Zip Code 37046
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

Transaction ID : SA11AI.61197

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 68
<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)
TEA PARTY MAJORITY FUND

A. DUMEY 637, BRENDA K, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 218

City BENTON	State MO	Zip Code 63736
----------------	-------------	-------------------

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

Name of Employer (for Individual) BRENDA K CONSTRUCTION	Occupation (for Individual) SECRETARY
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2016

Transaction ID : SA11AI.61207

Amount of Each Receipt this Period
150.00

Memo Item

B. DUVERNELL 530, SCOTT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 151 E DEKORA ST
APT 103

City SAUKVILLE	State WI	Zip Code 53080
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

Transaction ID : SA11AI.61220

Amount of Each Receipt this Period
150.00

Memo Item

C. EARLY 891, RUTH, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1801 MORA LN

City LAS VEGAS	State NV	Zip Code 89102
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		15		2016

Transaction ID : SA11AI.61230

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. EGGE 548, VERNON L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10661 W COUNTY ROAD B

City HAYWARD	State WI	Zip Code 54843
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2016

Transaction ID : SA11AI.61253

Amount of Each Receipt this Period
100.00

Memo Item

B. EPP 231, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9403 MARIE RD

City NEW KENT	State VA	Zip Code 23124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2016

Transaction ID : SA11AI.61301

Amount of Each Receipt this Period
75.00

Memo Item

C. EPP 231, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9403 MARIE RD

City NEW KENT	State VA	Zip Code 23124
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2016

Transaction ID : SA11AI.61302

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 22 OF 68
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ESTELL 358, MARTHA, , MS,
Mailing Address 102 PATDEAN DR

City HUNTSVILLE	State AL	Zip Code 35811
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) 5TH X COUNTY		Occupation (for Individual) PROBATION OFFICER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 14 / 2016
Transaction ID : SA11AI.61321

Amount of Each Receipt this Period
100.00

Memo Item

B. EZELL 850, RAY, , MR,
Mailing Address 28417 N 63RD PL

City PHOENIX	State AZ	Zip Code 85005
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SUN VALLEY MANUFACTURING LLC		Occupation (for Individual) BUSINESS OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 12 / 2016
Transaction ID : SA11AI.61345

Amount of Each Receipt this Period
200.00

Memo Item

C. FALKENBERG 762, ANNALYNE, , MS,
Mailing Address 311 LAKESHORE RD

City DENTON	State TX	Zip Code 76208
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SOLO FAST & EASY LLC		Occupation (for Individual) MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 16 / 2016
Transaction ID : SA11AI.61357

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 68
<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)
TEA PARTY MAJORITY FUND

A. FEE 100, BERNADETTE T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 653 E 14TH ST APT 11E

City NEW YORK	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

Transaction ID : SA11AI.61375

Amount of Each Receipt this Period
125.00

Memo Item

B. FIELDMAN 115, JOEL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 40 TURF LN

City ROSLYN HEIGHTS	State NY	Zip Code 11577
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2016

Transaction ID : SA11AI.61398

Amount of Each Receipt this Period
200.00

Memo Item

C. FISCHER 863, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1444

City CHINO VALLEY	State AZ	Zip Code 86323
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2016

Transaction ID : SA11AI.61405

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 68
<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)
TEA PARTY MAJORITY FUND

A. FLORY 195, ROGER, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 370 HUNTZINGER RD

City WERNERSVILLE	State PA	Zip Code 19565
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

Transaction ID : SA11AI.61428

Amount of Each Receipt this Period
100.00

Memo Item

B. FOTH 441, ARTHUR F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11221 PEARL RD

City STRONGSVILLE	State OH	Zip Code 44136
----------------------	-------------	-------------------

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

Name of Employer (for Individual) FOTH AND FOTH LPA	Occupation (for Individual) PARTNER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2016

Transaction ID : SA11AI.61454

Amount of Each Receipt this Period
50.00

Memo Item

C. GALWAY 940, EVE L, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18 PARK MANOR DR

City DALY CITY	State CA	Zip Code 94015
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	06	/	2016

Transaction ID : SA11AI.61534

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 25 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. GENOVESE 334, ANTHONY J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3491 CHICKASAW CIR
 City GREENACRES State FL Zip Code 33467
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 21 / 2016
Transaction ID : SA11AI.61594
 Amount of Each Receipt this Period 200.00
 Memo Item

B. GERANDT 731, BART W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7219 PHEASANT CV
 City OKLAHOMA CITY State OK Zip Code 73162
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11AI.61606
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GIVENS 781, W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22133 OLD NACOGDOCHES RD
 City NEW BRAUNFELS State TX Zip Code 78132
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RH & DG GIVENS INC Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 30 / 2016
Transaction ID : SA11AI.61650
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. GOODE 766, ZANDY D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6014 OLD LORENA RD
 City LORENA State TX Zip Code 76655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GAVILON FERTILIZER CO Occupation (for Individual) SALESMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 06 / 2016**
Transaction ID : SA11AI.61681
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GOURLAY 481, GERALD L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10329 CHEROKEE ST
 City TAYLOR State MI Zip Code 48180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 30 / 2016**
Transaction ID : SA11AI.61694
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HAINES 344, ALICE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1560 NW 18TH CT
 City CRYSTAL RIVER State FL Zip Code 34428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 22 / 2016**
Transaction ID : SA11AI.61790
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. HALLMAN 770, GRADY L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3443 INWOOD DR

City HOUSTON	State TX	Zip Code 77019
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	23	/	2016

Transaction ID : SA11AI.61798

Amount of Each Receipt this Period
250.00

Memo Item

B. HAMRICK 281, RACHEL J, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3014 POPLAR CIR

City SHELBY	State NC	Zip Code 28152
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

Transaction ID : SA11AI.61810

Amount of Each Receipt this Period
100.00

Memo Item

C. HATTON 992, REBECCA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9711 E EMPIRE AVE

City SPOKANE	State WA	Zip Code 99206
-----------------	-------------	-------------------

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

Name of Employer (for Individual) HATTON SENIOR FAMILY HOME	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2016

Transaction ID : SA11AI.61880

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. HAYES 712, PATTY D, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 MILLER HAYES RD
 City FARMERVILLE State LA Zip Code 71241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11AI.61901
 Amount of Each Receipt this Period 200.00
 Memo Item

B. HENRY 436, MIKE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3528 MAPLEWAY DR
 City TOLEDO State OH Zip Code 43614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 15 / 2016
Transaction ID : SA11AI.61955
 Amount of Each Receipt this Period 100.00
 Memo Item

C. HUTTON 727, MARK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 CLIFTY HWY
 City HINDSVILLE State AR Zip Code 72738
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 22 / 2016
Transaction ID : SA11AI.62173
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. IRWIN 217, WILLIAM L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7105 UNAKITE CT

City MIDDLETOWN	State MD	Zip Code 21769
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

Transaction ID : SA11AI.62194

Amount of Each Receipt this Period
100.00

Memo Item

B. ISHIZUKA 105, YUKIO, , DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 PURCHASE ST

City RYE	State NY	Zip Code 10580
-------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) PSYCHIATRIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2016

Transaction ID : SA11AI.62206

Amount of Each Receipt this Period
100.00

Memo Item

C. JOHNSON 460, ERIC, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2016

Transaction ID : SA11AI.62262

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. JONES 432, JOHN R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) JONES FUEL COMPANY	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

Transaction ID : SA11AI.62290

Amount of Each Receipt this Period
100.00

Memo Item

B. JONES 934, JANET D, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4825 BASELINE AVE

City SANTA YNEZ	State CA	Zip Code 93460
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2016

Transaction ID : SA11AI.62296

Amount of Each Receipt this Period
50.00

Memo Item

C. KEENAN 734, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3960 EZ ST

City KINGSTON	State OK	Zip Code 73439
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : SA11AI.62366

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. KELTNER 740, DARRELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2701 CLAREMONT DR

City BARTLESVILLE	State OK	Zip Code 74006
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2016

Transaction ID : SA11AI.62381

Amount of Each Receipt this Period
100.00

Memo Item

B. KIDWELL 328, MAX, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 CINNAMON BARK LN

City ORLANDO	State FL	Zip Code 32835
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2016

Transaction ID : SA11AI.62413

Amount of Each Receipt this Period
100.00

Memo Item

C. KING 338, IVAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3015 SILVERADO TER

City WINTER HAVEN	State FL	Zip Code 33884
----------------------	-------------	-------------------

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

Name of Employer (for Individual) KING ENGINEERING INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2016

Transaction ID : SA11AI.62422

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. KING 433, STEPHEN, , DR, MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9713 ROSEWOOD QUINCY RD
 City QUINCY State OH Zip Code 43343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 21 / 2016**
Transaction ID : SA11AI.62425
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KUBIN 751, ROBERT E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 E GRUBB DR
 City MESQUITE State TX Zip Code 75149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DBI MAINTANCE Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **11 / 30 / 2016**
Transaction ID : SA11AI.62545
 Amount of Each Receipt this Period 50.00
 Memo Item

C. LARAWAY 078, WAYNE D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 ASPEN PL
 City LONG VALLEY State NJ Zip Code 07853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TC TECH LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **12 / 29 / 2016**
Transaction ID : SA11AI.62604
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. LEACH 773, SARA B, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3002 HEATHERPARK DR
 City KINGWOOD State TX Zip Code 77345
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 27 / 2016
Transaction ID : SA11AI.62631
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. LEFLER 487, JAMES A, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 502 W CRUMP ST
 City BAY CITY State MI Zip Code 48706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) DISABLED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2016
Transaction ID : SA11AI.62645
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. LEZHNYAK 010, VICTOR N, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 232 RUSSELLVILLE RD
 City WESTFIELD State MA Zip Code 01085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REFUSED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2016
Transaction ID : SA11AI.62688
 Amount of Each Receipt this Period
 100.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LI 852, KUANG, , ,

Mailing Address 2533 E CHESTER DR

City CHANDLER	State AZ	Zip Code 85286
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2016

Transaction ID : SA11AI.62689

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LINDSAY 123, FREDRIC, , MR,

Mailing Address 133 SARATOGA RD
APT 108-4

City GLENVILLE	State NY	Zip Code 12302
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2016

Transaction ID : SA11AI.62702

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LUETH 486, WALTER, , MR,

Mailing Address 5605 PONDVIEW DR

City MIDLAND	State MI	Zip Code 48640
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2016

Transaction ID : SA11AI.62760

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MARTIN 175, GERALD, , MR,
Mailing Address 247 MENTZER RD

City NEW HOLLAND	State PA	Zip Code 17557
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GG MARTIN & SONS EXCAVATING & TRUCKING		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 21 / 2016
Transaction ID : **SA11AI.62868**

Amount of Each Receipt this Period
100.00

Memo Item

B. MAXFIELD 770, MARIETTA M, , MS,
Mailing Address 11415 HOLIDAN WAY

City HOUSTON	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00

Date of Receipt
12 / 13 / 2016
Transaction ID : **SA11AI.62896**

Amount of Each Receipt this Period
200.00

Memo Item

C. MAY 759, JACK B, , MR,
Mailing Address 929 US HIGHWAY 287

City WOODVILLE	State TX	Zip Code 75979
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 485.00

Date of Receipt
12 / 13 / 2016
Transaction ID : **SA11AI.62899**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MCDONALD 774, BARBARA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1809 HAWTHORN DR

City RICHMOND	State TX	Zip Code 77469
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2016

Transaction ID : SA11AI.62936

Amount of Each Receipt this Period
150.00

Memo Item

B. MC INTOSH 450, KIMBERLEY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 72 ROYAL BIRKDALE

City SPRINGBORO	State OH	Zip Code 45066
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2016

Transaction ID : SA11AI.62911

Amount of Each Receipt this Period
1000.00

Memo Item

C. MCINTOSH 730, JERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1727 JENKINS AVE

City NORMAN	State OK	Zip Code 73072
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

Transaction ID : SA11AI.62956

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1175.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 68
	<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)
TEA PARTY MAJORITY FUND

A. MCLEOD 206, ELROY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4800 PAUL HANCE RD
 City HUNTINGTOWN State MD Zip Code 20639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11AI.62966
 Amount of Each Receipt this Period 50.00
 Memo Item

B. MCSPADDEN 920, KAREN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 GLENDORA DR
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 21 / 2016
Transaction ID : SA11AI.62982
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MEYER 220, CHARLES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10010 EASTLAKE DR
 City FAIRFAX State VA Zip Code 22032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.63016
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MILLER 467, DAVID N, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 LAKESIDE DR

City ROME CITY	State IN	Zip Code 46784
-------------------	-------------	-------------------

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

Name of Employer (for Individual) SILVER BAY REALTY CORP	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		13		2016

Transaction ID : SA11AI.63049

Amount of Each Receipt this Period
100.00

Memo Item

B. MINTON 217, DAVID, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7949 MCKAIG RD

City FREDERICK	State MD	Zip Code 21701
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

Transaction ID : SA11AI.63075

Amount of Each Receipt this Period
250.00

Memo Item

C. MOORE 260, TERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 218 CLEARVIEW HEIGHTS DR

City MOUNDSVILLE	State WV	Zip Code 26041
---------------------	-------------	-------------------

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

Name of Employer (for Individual) WESTFORD HEALTH	Occupation (for Individual) MEDICAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

Transaction ID : SA11AI.63113

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MORRIS 176, SHIRLEY, , MS,
Mailing Address 502 ELIZABETH DR

City LANCASTER	State PA	Zip Code 17601
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
11 / 29 / 2016
Transaction ID : SA11AI.63141

Amount of Each Receipt this Period
100.00

Memo Item

B. MORRISON 188, DORIS B, , ,
Mailing Address 2863 TINGLEY LAKE RD

City NEW MILFORD	State PA	Zip Code 18834
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Date of Receipt
12 / 15 / 2016
Transaction ID : SA11AI.63151

Amount of Each Receipt this Period
150.00

Memo Item

C. MOXLEY 339, CHARLES, , MR,
Mailing Address 1518 DORCHESTER ST

City PT CHARLOTTE	State FL	Zip Code 33952
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SMITHFIELD FARMLAND FOODS		Occupation (for Individual) NATIONAL ACCOUNTS MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
12 / 14 / 2016
Transaction ID : SA11AI.63177

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 40 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. NELSON 875, LILLIAN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 115
 City ALCALDE State NM Zip Code 87511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 29 / 2016
Transaction ID : SA11AI.63236
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NORDGREN 880, ELENA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 502
 City HILLSBORO State NM Zip Code 88042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 06 / 2016
Transaction ID : SA11AI.63283
 Amount of Each Receipt this Period 200.00
 Memo Item

C. OAKES 563, NANCY, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 17TH ST N
 City SAINT CLOUD State MN Zip Code 56303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 12 / 13 / 2016
Transaction ID : SA11AI.63300
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 68
<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)
TEA PARTY MAJORITY FUND

A. OCHS 617, DAVID T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 104 E WATER ST
 City PONTIAC State IL Zip Code 61764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 09 / 2016
Transaction ID : SA11AI.63304
 Amount of Each Receipt this Period 100.00
 Memo Item

B. OGNIBENE 113, MARGARET, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6482 83RD ST
 City MIDDLE VILLAGE State NY Zip Code 11379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 29 / 2016
Transaction ID : SA11AI.63320
 Amount of Each Receipt this Period 50.00
 Memo Item

C. ORTA 851, CARMEN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19151 E SPARROW CT
 City QUEEN CREEK State AZ Zip Code 85142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EVERBRIDGE Occupation (for Individual) ACCOUNT MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 20 / 2016
Transaction ID : SA11AI.63341
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 68
<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)
TEA PARTY MAJORITY FUND

A. OTHOLD 086, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 159 KNAPP AVE

City HAMILTON	State NJ	Zip Code 08610
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2016

Transaction ID : SA11AI.63346

Amount of Each Receipt this Period
200.00

Memo Item

B. PAINTER 985, BETTY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17014 161ST AVE SE

City YELM	State WA	Zip Code 98597
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2016

Transaction ID : SA11AI.63373

Amount of Each Receipt this Period
200.00

Memo Item

C. PARKER 705, ROBERT R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 758

City LAKE ARTHUR	State LA	Zip Code 70549
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2016

Transaction ID : SA11AI.63400

Amount of Each Receipt this Period
65.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	465.00
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 43 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. PARKS 065, ROGER L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 RAYNHAM RD
 City NEW HAVEN State CT Zip Code 06512
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 16 / 2016
Transaction ID : SA11AI.63405
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PECKERD 115, HAROLD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 ROCKWOOD AVE
 City BALDWIN State NY Zip Code 11510
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PECKERD VENETIAN BLINDS Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 12 / 09 / 2016
Transaction ID : SA11AI.63442
 Amount of Each Receipt this Period 75.00
 Memo Item

C. PETKUS 604, DONALD M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12401 ARCHER AVE
 City LEMONT State IL Zip Code 60439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FUNERAL DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 30 / 2016
Transaction ID : SA11AI.63478
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
TEA PARTY MAJORITY FUND

A. PINKERTON 456, GLEN, , MR,
Mailing Address 759 ALMA OMEGA RD

City WAVERLY	State OH	Zip Code 45690
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MEAD PAPER CO		Occupation (for Individual) TRUCK DRIVER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 495.00

Date of Receipt
12 / 23 / 2016
Transaction ID : SA11AI.63509

Amount of Each Receipt this Period
105.00

Memo Item

B. PLEAKE 799, KENNETH F, , MR,
Mailing Address 3125 ZION LN

City EL PASO	State TX	Zip Code 79904
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.00

Date of Receipt
12 / 02 / 2016
Transaction ID : SA11AI.63520

Amount of Each Receipt this Period
50.00

Memo Item

C. PUSTA 855, LENORA H, , MS,
Mailing Address 138 W SUNFLOWER DR

City PAYSON	State AZ	Zip Code 85541
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
12 / 26 / 2016
Transaction ID : SA11AI.63602

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	205.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. RHEINISH 863, ROBERT K, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 380 LONG BR W

City PRESCOTT	State AZ	Zip Code 86303
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2016

Transaction ID : SA11AI.63697

Amount of Each Receipt this Period
100.00

Memo Item

B. RIDDLE 264, RICHARD D, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 E 7TH ST

City WESTON	State WV	Zip Code 26452
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2016

Transaction ID : SA11AI.63716

Amount of Each Receipt this Period
250.00

Memo Item

C. ROBBINS 467, RITA E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1615 S CLARK RD

City MARKLE	State IN	Zip Code 46770
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2016

Transaction ID : SA11AI.63752

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 46 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ROBLES 770, IRENE A, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4066 SILVERWOOD DR
 City HOUSTON State TX Zip Code 77025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROOKSHIRE GROCERY COMPANY Occupation (for Individual) PHARMACIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt 12 / 02 / 2016
Transaction ID : SA11AI.63768
 Amount of Each Receipt this Period 35.00
 Memo Item

B. ROGERS 365, JOAN H, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 CRESTVIEW CIR
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.63787
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROLSTON 231, DAVID R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 KATHERINE SHAYE LN
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROLSTON CONSULTING LLC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11AI.63793
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ROSAS 515, RICHARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2813 AVENUE K

City COUNCIL BLFS	State IA	Zip Code 51501
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ROSAS HOLDINGS LLC	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2016

Transaction ID : SA11AI.63799

Amount of Each Receipt this Period
250.00

Memo Item

B. ROSS 370, ANN R, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 358 PEARTREE DR

City CLARKSVILLE	State TN	Zip Code 37043
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2016

Transaction ID : SA11AI.63801

Amount of Each Receipt this Period
100.00

Memo Item

C. ROWLES 230, RHONDA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 RIDDLES BRIDGE RD

City GOOCHLAND	State VA	Zip Code 23063
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2016

Transaction ID : SA11AI.63817

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. SCHON 468, THOMAS A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10411 GOSHEN RD

City FORT WAYNE	State IN	Zip Code 46818
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2016

Transaction ID : SA11AI.63929

Amount of Each Receipt this Period
100.00

Memo Item

B. SCHRECK 500, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1026 150TH ST

City CHARITON	State IA	Zip Code 50049
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2016

Transaction ID : SA11AI.63933

Amount of Each Receipt this Period
100.00

Memo Item

C. SCHROEDL 606, ELIZABETH, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5043 W GRACE ST

City CHICAGO	State IL	Zip Code 60641
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2016

Transaction ID : SA11AI.63940

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. SCOTT 805, RONALD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8110 LOUDEN CIR

City WINDSOR	State CO	Zip Code 80528
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2016

Transaction ID : SA11AI.63977

Amount of Each Receipt this Period
100.00

Memo Item

B. SHANE 300, LOUISE B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1875 BETHANY WAY

City ALPHARETTA	State GA	Zip Code 30004
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2016

Transaction ID : SA11AI.64038

Amount of Each Receipt this Period
150.00

Memo Item

C. SHAW 024, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 126 LANGDON ST

City NEWTON	State MA	Zip Code 02458
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2016

Transaction ID : SA11AI.64045

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 50 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. SMITH 378, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3184 ROY MESSER HWY
 City WHITE PINE State TN Zip Code 37890
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11AI.64150
 Amount of Each Receipt this Period 200.00
 Memo Item

B. SMITH 984, EDWARD J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8412 20TH ST W
 City UNIVERSITY PLACE State WA Zip Code 98466
 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 ▼ 300.00

Date of Receipt 11 / 29 / 2016
Transaction ID : SA11AI.64165
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SONDHEIMER 801, DAVID H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2810 HIWALL CT
 City CASTLE ROCK State CO Zip Code 80109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2016
Transaction ID : SA11AI.64182
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. STANDARD 774, PATRICIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11915 BLOOMINGTON LN
 City STAFFORD State TX Zip Code 77477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PROPHEMIC WORD FELLOWSHIP Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2016
Transaction ID : SA11AI.64223
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. STEGER 244, DONALD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2875
 City STAUNTON State VA Zip Code 24402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2016
Transaction ID : SA11AI.64244
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. STEVENS 945, DEBORAH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 156 DIABLO RD STE 300
 City DANVILLE State CA Zip Code 94526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRES GROUP INC Occupation (for Individual) SECRETARY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2016
Transaction ID : SA11AI.64267
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 52 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. STOBBE 495, JOANNE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2472 BLANCHARD ST SW
 City WYOMING State MI Zip Code 49519
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 30 / 2016
Transaction ID : SA11AI.64272
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TAVERNETTI 891, TERRELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5903 BUFF BAY ST
 City LAS VEGAS State NV Zip Code 89148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11AI.64380
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TAYLOR 786, DON, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3151 WENDEL RD
 City HARPER State TX Zip Code 78631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 12 / 01 / 2016
Transaction ID : SA11AI.64387
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 68
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. TENBROEK 554, HENRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4533 VANDERVORK AVE
 City MINNEAPOLIS State MN Zip Code 55436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 22 / 2016
Transaction ID : SA11AI.64398
 Amount of Each Receipt this Period 50.00
 Memo Item

B. TRUCHAN 330, JORDAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 DOCKSIDE LN
 City KEY LARGO State FL Zip Code 33037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMERICAN SHIP MANAGEMENT LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 15 / 2016
Transaction ID : SA11AI.64483
 Amount of Each Receipt this Period 100.00
 Memo Item

C. TURNBAUGH 853, DOROTHY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16345 W ROOSEVELT ST
 City GOODYEAR State AZ Zip Code 85338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.64500
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 68
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. TUROWSKI 601, DANIEL M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 924 N PRATER AVE

City MELROSE PARK	State IL	Zip Code 60164
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2016

Transaction ID : SA11AI.64507

Amount of Each Receipt this Period
250.00

Memo Item

B. UPFIELD 752, KIMBERLY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3423 PINE TREE CIR

City FARMERS BRANCH	State TX	Zip Code 75234
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) Homemaker
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2016

Transaction ID : SA11AI.64523

Amount of Each Receipt this Period
100.00

Memo Item

C. VALK 170, LIZ, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1713 OLMSTED WAY W

City CAMP HILL	State PA	Zip Code 17011
-------------------	-------------	-------------------

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

Name of Employer (for Individual) VALK MANUFACTURING	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2016

Transaction ID : SA11AI.64535

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 68
<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)
TEA PARTY MAJORITY FUND

A. VOGT 671, MILDRED R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 IVY DR
 APT 106
 City NORTH NEWTON State KS Zip Code 67117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 12 / 2016
Transaction ID : SA11Al.64580
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WARREN 351, GLENDA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6128 AL HIGHWAY 155
 City MONTEVALLO State AL Zip Code 35115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B&J METAL CUTTERS INC Occupation (for Individual) CUSTOMER SERVICE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 05 / 2016
Transaction ID : SA11Al.64641
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WESTENBERG 481, GREGORY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17336 OAK HILL DR
 City NORTHVILLE State MI Zip Code 48168
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ZMW TRAVEL LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 22 / 2016
Transaction ID : SA11Al.64719
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 56 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WISNIEWSKI 995, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24808 TEAL LOOP
 City CHUGIAK State AK Zip Code 99567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 23 / 2016
Transaction ID : SA11AI.64847
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WOLF 648, KARI, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1324 NORTHRIDGE TER
 City JOPLIN State MO Zip Code 64801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 01 / 2016
Transaction ID : SA11AI.64859
 Amount of Each Receipt this Period 100.00
 Memo Item

C. YODER 465, ORVAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 144
 City TOPEKA State IN Zip Code 46571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OK SAW AND TOOL INC Occupation (for Individual) TOOL MAKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 13 / 2016
Transaction ID : SA11AI.64922
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 57 OF 68
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZUBAL 160, THOMAS, , MR,

Mailing Address **212 CLARK AVE**

City **BUTLER** State **PA** Zip Code **16002**

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

Name of Employer (for Individual) **NONE** Occupation (for Individual) **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
12 / 05 / 2016

Transaction ID : SA11AI.64967

Amount of Each Receipt this Period
250.00

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).....▶	250.00
TOTAL This Period (last page this line number only).....▶	19725.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. BAKER HOSTETLER LLP		Date of Disbursement MM / DD / YYYY 12 / 28 / 2016
Mailing Address PO BOX 70189		FEC Identification Number C00566174 Transaction ID : SB21B.64995
City CLEVELAND	State OH	Zip Code 44190
Purpose of Disbursement PAC LEGAL SERVICES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 40000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 02 / 2016
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.64974
City SUGAR LAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX COLLECTION FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 7.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.64974
City SUGAR LAND	State TX	Zip Code 77478
Purpose of Disbursement WIRE TRANSFER FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 25.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

40032.95

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.64976
City SUGAR LAND	State TX	Zip Code 77478
Purpose of Disbursement INTERCHANGE FEES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 2281.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.64977
City SUGAR LAND	State TX	Zip Code 77478
Purpose of Disbursement MERCHANT DISCOUNT FEES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 1084.88
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.64978
City SUGAR LAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX DISCOUNT FEES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 322.72
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3689.59
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement
MERCHANT DISCOUNT FEES

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 05 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64979

Amount of Each Disbursement this Period: 52.54

Memo Item

B. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement
WIRE TRANSFER FEE

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64980

Amount of Each Disbursement this Period: 25.00

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement
MERCHANT DISCOUNT FEES

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 16 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64981

Amount of Each Disbursement this Period: 50.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 127.54

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64982

Amount of Each Disbursement this Period: 25.00

Memo Item

B. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 29 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64983

Amount of Each Disbursement this Period: 25.00

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGAR LAND State TX Zip Code 77478

Purpose of Disbursement WIRE TRANSFER FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2016

FEC Identification Number: C00566174
Transaction ID : SB21B.64984

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 75.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. IMAGINE IT DESIGN LLC

Mailing Address 100 TEAL LN #34

City LAFAYETTE State LA Zip Code 70507

Purpose of Disbursement
PAC POST-ELECTION WEBSITE UPDATE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
MM / DD / YYYY
12 / 09 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64993
Amount of Each Disbursement this Period
4000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
MM / DD / YYYY
12 / 05 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64996
Amount of Each Disbursement this Period
53901.09

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
ALLOCATED TO LINE 24

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
MM / DD / YYYY
12 / 05 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.65005
Amount of Each Disbursement this Period
-32318.20

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 25582.89
TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 19 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64997
Amount of Each Disbursement this Period
40964.18

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 29 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64998
Amount of Each Disbursement this Period
61589.28

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PAC TELEMARKETING

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 30 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64999
Amount of Each Disbursement this Period
400.38

Memo Item

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

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

102953.84

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MACKENZIE & COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 2776 S ARLINGTON MILL DRIVE
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 02 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64989

Amount of Each Disbursement this Period
3500.00

Memo Item

B. PARAMOUNT COMMUNICATION GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 525 K EAST MARKET STREET #114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
PAC eMAIL SOLICITATIONS / COPY WRITING / REPORTS

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 12 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64990

Amount of Each Disbursement this Period
4506.36

Memo Item

C. PARAMOUNT COMMUNICATION GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 525 K EAST MARKET STREET #114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement
PAC eMAIL SOLICITATIONS / DOMAIN REPORTS

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y
12 / 15 / 2016

FEC Identification Number
C C00566174
Transaction ID : SB21B.64991

Amount of Each Disbursement this Period
5136.68

Memo Item

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

13143.04

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. STRATEGIC CAMPAIGN GROUP

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 191 MAIN STREET
SUITE 310

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2016

City ANNAPOLIS State MD Zip Code 21401

FEC Identification Number

Purpose of Disbursement
PAC SOCIAL MEDIA POSTINGS & UPDATES

C	C00566174
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Candidate Name
TEA PARTY MAJORITY FUND

001
Category/ Type

Transaction ID : SB21B.64994

Amount of Each Disbursement this Period

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

1500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

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

--

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

M M M	/	D D D	/	Y Y Y Y Y Y

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/ Type

Amount of Each Disbursement this Period

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

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Memo Item

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

1500.00

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

187104.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. FRIENDS OF MIA LOVE		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address PO BOX 255		FEC Identification Number C00505776 Transaction ID : SB23.65013
City RIVERTON	State UT	Zip Code 84065
Purpose of Disbursement 2016 GENERAL ELECTION DEBT RETIREMENT		Amount of Each Disbursement this Period 500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: UT	District: 04	

Full Name (Last, First, Middle Initial) B. JOHN KENNEDY FOR US		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address 2900 CLEARVIEW PKWY SUITE 206		FEC Identification Number C00608398 Transaction ID : SB23.65012
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement 2016 SPECIAL GENERAL ELECTION CONTRIBUTION		Amount of Each Disbursement this Period 1250.00
Candidate Name KENNEDY, JOHN NEELY, , ,		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General	
State: LA	District: 00	

Full Name (Last, First, Middle Initial) C. KING FOR CONGRESS		Date of Disbursement MM / DD / YYYY 11 / 29 / 2016
Mailing Address PO BOX 398 202 W 2ND ST		FEC Identification Number C00373563 Transaction ID : SB23.65015
City WALL LAKE	State IA	Zip Code 51466
Purpose of Disbursement 2016 GENERAL ELECTION DEBT RETIREMENT		Amount of Each Disbursement this Period 500.00
Candidate Name KING, STEVE MR., , ,		<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 04	

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

2250.00

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

2250.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 68
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INFOCISION MANAGEMENT CORP			Nature of Debt (Purpose): IE - VOTER CONTACT CALLS
Mailing Address 325 SPRINGSIDE DRIVE			
City AKRON	State OH	Zip Code 44333	

Outstanding Balance Beginning This Period <input type="text" value="30000.00"/>		Transaction ID : SD10.49237	
Amount Incurred This Period <input type="text" value="126854.93"/>	Payment This Period <input type="text" value="156854.93"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

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 <input type="text"/>			
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) TEA PARTY MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ C C00566174
---	--

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

Full Name of Payee <input type="checkbox"/> Memo Item INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 325 SPRINGSIDE DRIVE		Amount <input type="text"/> 32318.20
City AKRON	State OH	
Purpose of Expenditure VOTER CONTACT CALLS	Category/Type <input type="text"/> 004	Transaction ID : SE.65006 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 766101.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

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

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 32318.20
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/> 32318.20

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.

MACKENZIE, SCOTT B, , [Electronically Filed]
Signature Date / /