

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Foundation for a Greater America, Inc.

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="254.58"/>	<input type="text" value="254.58"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="254.58"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="378756.64"/>	<input type="text" value="378756.64"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="379011.22"/>	<input type="text" value="379011.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="376094.36"/>	<input type="text" value="376094.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2916.86"/>	<input type="text" value="2916.86"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="220051.56"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="423671.12"/>	

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

Foundation for a Greater America, Inc.

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13795.00	13795.00
(ii) Unitemized	19046.64	19046.64
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	32841.64	32841.64
(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)	32841.64	32841.64
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	322305.00	322305.00
14. Loan Repayments Received.....	23461.78	23461.78
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.).....	148.22	148.22
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)).....▶	378756.64	378756.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	378756.64	378756.64

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	77902.57	77902.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	77902.57	77902.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	214791.79	214791.79
27. Loans Made.....	78600.00	78600.00
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).....	4800.00	4800.00
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)) ..	376094.36	376094.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	376094.36	376094.36

DETAILED SUMMARY PAGE
of Disbursements

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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)	32841.64	32841.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32841.64	32841.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	77902.57	77902.57
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	77902.57	77902.57

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 98
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Carpenter, Lois, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12758 County Road 501
 City Bayfield State CO Zip Code 81122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 22 / 2015**
Transaction ID : INCA1438
 Amount of Each Receipt this Period 200.00
 Memo Item

B. Carpenter, Lois, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12758 County Road 501
 City Bayfield State CO Zip Code 81122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 09 / 2015**
Transaction ID : INCA2467
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Cimarra, Joselito S., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5108 Adnian Court
 City Antioch State CA Zip Code 94531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cimarra FamilyCare Homes, LLC Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **05 / 19 / 2015**
Transaction ID : INCA4000
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
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 98
<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)
Foundation for a Greater America, Inc.

A. Davis, Norma, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 Lasuen Drive
 City Millbrae State CA Zip Code 94030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Norma Davis Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 10 / 2015
Transaction ID : INCA1667
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Dendy, Jeanine C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2329 Hill Street
 City Alexandria State LA Zip Code 71301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 06 / 11 / 2015
Transaction ID : INCA1670
 Amount of Each Receipt this Period 400.00
 Memo Item

C. Finiks Capital, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3625 W. MacArthur Blvd., #302
 City Santa Ana State CA Zip Code 92704
 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 ▼ 6048.22

Date of Receipt 04 / 28 / 2015
Transaction ID : INCA753
 Amount of Each Receipt this Period 2900.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3800.00
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 98
	<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)
Foundation for a Greater America, Inc.

A. Finiks Capital, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2015

Transaction ID : INCA755

Amount of Each Receipt this Period

3000.00

 Memo Item

B. Fressola, Ralph, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2255 Armstrong Court, SW

City Conyers	State GA	Zip Code 30094
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Ralph Fressola	Occupation (for Individual) Business Owner
---	---

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
04	/	20	/	2015

Transaction ID : INCA1487

Amount of Each Receipt this Period

500.00

 Memo Item

C. Gerson, Jeanne K., , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 333 North Palm Drive, Apt. 105

City Beverly Hills	State CA	Zip Code 90210
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) n/a	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
06	/	25	/	2015

Transaction ID : INCA1776

Amount of Each Receipt this Period

250.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3750.00
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 9 OF 98
<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)
Foundation for a Greater America, Inc.

A. Maggio, Lois E., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 Harvest Lane
 City Morgan Hill State CA Zip Code 95037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 06 / 09 / 2015
Transaction ID : INCA4002
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Maggio, Lois E., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 237 Harvest Lane
 City Morgan Hill State CA Zip Code 95037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 06 / 09 / 2015
Transaction ID : INCA1655
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Maruzo, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Oak Hills Trail
 City Ledyard State CT Zip Code 06339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2015
Transaction ID : INCA1534
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1270.00
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 10 OF 98
	<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)
Foundation for a Greater America, Inc.

A. Meyer, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6733 Leopard Street
 City Corpus Christi State TX Zip Code 78409
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Meyer Oil Field Services Occupation (for Individual) Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 19 / 2015**
Transaction ID : INCA2017
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Montgomery, Thelma L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 South Goldwyn Avenue
 City Orlando State FL Zip Code 32805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **03 / 23 / 2015**
Transaction ID : INCA1491
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Montgomery, Thelma L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 South Goldwyn Avenue
 City Orlando State FL Zip Code 32805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **04 / 24 / 2015**
Transaction ID : INCA1799
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 98
<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)
Foundation for a Greater America, Inc.

A. Montgomery, Thelma L., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 912 South Goldwyn Avenue
 City Orlando State FL Zip Code 32805
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 06 / 18 / 2015
Transaction ID : INCA1761
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Ross, Rose Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1422 Zero Gordo Street
 City Los Angeles State CA Zip Code 90026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Southern California Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 26 / 2015
Transaction ID : INCA1782
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Roundtree, Bennie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 Bonners Lane
 City Greenville State NC Zip Code 27834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roundtree Real Estate Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2015
Transaction ID : INCA1480
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
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 98
	<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)
Foundation for a Greater America, Inc.

A. Roundtree, Bennie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 Bonners Lane
 City Greenville State NC Zip Code 27834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roundtree Real Estate Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **05 / 16 / 2015**
Transaction ID : INCA2403
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Roundtree, Bennie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 Bonners Lane
 City Greenville State NC Zip Code 27834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Roundtree Real Estate Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **06 / 16 / 2015**
Transaction ID : INCA2558
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Sever, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 Southwest 25th Blvd., Unit 12
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 16 / 2015**
Transaction ID : INCA3997
 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 13 OF 98
	<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)
Foundation for a Greater America, Inc.

A. Sever, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5200 Southwest 25th Blvd., Unit 12
 City Gainesville State FL Zip Code 32608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 16 / 2015**
Transaction ID : INCA1453
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Shooter, Eric M., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 Golden Oak Drive
 City Portola Valley State CA Zip Code 94028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **06 / 02 / 2015**
Transaction ID : INCA4001
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Solomon, Arlene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 East El Cedral Street
 City Long Beach State CA Zip Code 90815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 25 / 2015**
Transaction ID : INCA4004
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 98
<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)
Foundation for a Greater America, Inc.

A. Wickham, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 928
 City Cutchogue State NY Zip Code 11935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a 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
 04 / 17 / 2015
Transaction ID : INCA3999
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Wickham, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 928
 City Cutchogue State NY Zip Code 11935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a 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
 04 / 17 / 2015
Transaction ID : INCA1450
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. Wickham, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 928
 City Cutchogue State NY Zip Code 11935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a 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
 06 / 05 / 2015
Transaction ID : INCA2409
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	13795.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 98
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input checked="" 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)
Foundation for a Greater America, Inc.

A. Church, Judson A., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 764 Pines Lake Drive West
 City Wayne State NJ Zip Code 07470
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Judson A. Church Occupation (for Individual) Lender
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt **01 / 27 / 2015**
Transaction ID : PAYA3820
 Amount of Each Receipt this Period 250000.00
 Memo Item

B. CrossClick Media, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8725 S. Eastern Avenue, #200-661
 City Las Vegas State NV Zip Code 89123
 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 ▼ 72305.00

Date of Receipt **01 / 06 / 2015**
Transaction ID : PAYA3814
 Amount of Each Receipt this Period 5.00
 Memo Item

C. CrossClick Media, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8725 S. Eastern Avenue, #200-661
 City Las Vegas State NV Zip Code 89123
 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 ▼ 72305.00

Date of Receipt **05 / 13 / 2015**
Transaction ID : PAYA3816
 Amount of Each Receipt this Period 19000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	269005.00
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA13

Transaction ID : PAYA3820

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

**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 98
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input checked="" 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)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

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

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas	State NV	Zip Code 89123
-------------------	-------------	-------------------

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 ▼
72305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : PAYA3812

Amount of Each Receipt this Period

26500.00

 Memo Item

B. CrossClick Media, Inc.

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

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas	State NV	Zip Code 89123
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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 ▼
72305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		13		2015

Transaction ID : PAYA3818

Amount of Each Receipt this Period

13200.00

 Memo Item

C. CrossClick Media, Inc.

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

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas	State NV	Zip Code 89123
-------------------	-------------	-------------------

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 ▼
72305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2015

Transaction ID : PAYA4021

Amount of Each Receipt this Period

3000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	42700.00
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 98
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

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 ▼
72305.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2015

Transaction ID : PAYA3810

Amount of Each Receipt this Period
 10600.00

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10600.00
TOTAL This Period (last page this line number only).....	322305.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 98
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Finiks Capital, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2015

Transaction ID : RCVA3844

Amount of Each Receipt this Period
2300.00

Memo Item

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

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : RCVA3848

Amount of Each Receipt this Period
2455.84

Memo Item

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

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Transaction ID : RCVA3850

Amount of Each Receipt this Period
14395.94

Memo Item

SUBTOTAL of Receipts This Page (optional).....	19151.78
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 98
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Finiks Capital, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2015

Transaction ID : RCVA3840

Amount of Each Receipt this Period
860.00

Memo Item

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

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2015

Transaction ID : RCVA3842

Amount of Each Receipt this Period
3000.00

Memo Item

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

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2015

Transaction ID : RCVA3846

Amount of Each Receipt this Period
450.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4310.00
TOTAL This Period (last page this line number only).....▶	23461.78

**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 98
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Finiks Capital, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3625 W. MacArthur Blvd., #302

City Santa Ana	State CA	Zip Code 92704
-------------------	-------------	-------------------

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 ▼
6048.22

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2015

Transaction ID : INCA3851

Amount of Each Receipt this Period
148.22

Memo Item
Loan Interest

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

M M	/	D D	/	Y Y Y Y

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

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	148.22
TOTAL This Period (last page this line number only).....	148.22

**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)
Foundation for a Greater America, Inc.

A. ACI Commercial Insurance Brokers

Full Name (Last, First, Middle Initial)

Mailing Address 505 East First Street, Suite E

City Tustin State CA Zip Code 92780

Purpose of Disbursement Insurance for Office Space

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2015

FEC Identification Number: C

Transaction ID : EXPB1065

Amount of Each Disbursement this Period: 237.50

Memo Item

B. Ault III, Milton C., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13101 Cottonwood

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement Strategic Planning Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 08 / 2015

FEC Identification Number: C

Transaction ID : EXPB1063

Amount of Each Disbursement this Period: 540.50

Memo Item

C. Ault III, Milton C., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 13101 Cottonwood

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement Strategic Planning Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 08 / 2015

FEC Identification Number: C

Transaction ID : EXPB3948

Amount of Each Disbursement this Period: 209.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 987.50

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. Ault III, Milton C., , ,		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015	
Mailing Address 13101 Cottonwood		FEC Identification Number C [REDACTED] Transaction ID : EXPB1064	
City Santa Ana	State CA	Zip Code 92705	Amount of Each Disbursement this Period [REDACTED] 400.00
Purpose of Disbursement Strategic Planning Consulting		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Ault III, Milton C., , ,		Date of Disbursement MM / DD / YYYY 06 / 19 / 2015	
Mailing Address 13101 Cottonwood		FEC Identification Number C [REDACTED] Transaction ID : EXPB3947	
City Santa Ana	State CA	Zip Code 92705	Amount of Each Disbursement this Period [REDACTED] 350.00
Purpose of Disbursement Strategic Planning Consulting		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Church, Judson A., , ,		Date of Disbursement MM / DD / YYYY 05 / 18 / 2015	
Mailing Address 764 Pines Lake Drive West		FEC Identification Number C [REDACTED] Transaction ID : EXPB930	
City Wayne	State NJ	Zip Code 07470	Amount of Each Disbursement this Period [REDACTED] 362.00
Purpose of Disbursement Loan Interest Payment		Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1112.00
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Coons, Mary E., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1155 Prospect Avenue

City Hartford State CT Zip Code 06105

Purpose of Disbursement Loan Interest Payment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 12 / 2015

FEC Identification Number: C

Transaction ID : **EXPB3954**

Amount of Each Disbursement this Period: 1418.67

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Technology & Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2015

FEC Identification Number: C

Transaction ID : **EXPB3903**

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Technology & Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: C

Transaction ID : **EXPB3907**

Amount of Each Disbursement this Period: 2018.21

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5936.88

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [REDACTED] Transaction ID : EXPB3905 Amount of Each Disbursement this Period 1000.00	
City Las Vegas	State NV	Zip Code 89123	Category/ Type 001
Purpose of Disbursement Technology & Administrative Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 04 / 24 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [REDACTED] Transaction ID : EXPB3901 Amount of Each Disbursement this Period 760.00	
City Las Vegas	State NV	Zip Code 89123	Category/ Type 001
Purpose of Disbursement Technology & Administrative Services		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 04 / 24 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [REDACTED] Transaction ID : EXPB3883 Amount of Each Disbursement this Period 204.38	
City Las Vegas	State NV	Zip Code 89123	Category/ Type 001
Purpose of Disbursement Call Center		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	1964.38
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)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Rent, Phone, Utilities & Callers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2015

FEC Identification Number: C

Transaction ID : EXPB3885

Amount of Each Disbursement this Period: 2595.62

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Call Center

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2015

FEC Identification Number: C

Transaction ID : EXPB3856

Amount of Each Disbursement this Period: 17000.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Technology & Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2015

FEC Identification Number: C

Transaction ID : EXPB3889

Amount of Each Disbursement this Period: 2565.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 22160.62

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)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Rent, Phone, Utilities & Callers

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8			2	0	1	5		

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB3887

Amount of Each Disbursement this Period

[REDACTED] 335.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Call Center

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	9			2	0	1	5		

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB3858

Amount of Each Disbursement this Period

[REDACTED] 3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Call Center

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	4			2	0	1	5		

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB3860

Amount of Each Disbursement this Period

[REDACTED] 2150.00

Memo Item

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

[REDACTED] 5485.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Call Center

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 06 / 2015

FEC Identification Number: C

Transaction ID : EXPB3862

Amount of Each Disbursement this Period: 700.00

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Call Center

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2015

FEC Identification Number: C

Transaction ID : EXPB3864

Amount of Each Disbursement this Period: 1275.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Call Center

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2015

FEC Identification Number: C

Transaction ID : EXPB3866

Amount of Each Disbursement this Period: 450.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2425.00

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)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Rent, Phone, Utilities & Callers

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 29 / 2015

FEC Identification Number: C

Transaction ID : EXPB3881

Amount of Each Disbursement this Period: 700.00

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Technology & Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB3893

Amount of Each Disbursement this Period: 725.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Technology & Administrative Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB3891

Amount of Each Disbursement this Period: 275.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1700.00

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)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Technology & Administrative Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

FEC Identification Number

C []
Transaction ID : EXPB3895
Amount of Each Disbursement this Period
[] 450.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Technology & Administrative Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	1	5

FEC Identification Number

C []
Transaction ID : EXPB3897
Amount of Each Disbursement this Period
[] 675.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement
Technology & Administrative Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

FEC Identification Number

C []
Transaction ID : EXPB3899
Amount of Each Disbursement this Period
[] 110.00

Memo Item

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

1	2	3	4	5	6	7	8	9	0

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

1	2	3	4	5	6	7	8	9	0

**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)
Foundation for a Greater America, Inc.

A. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 29 / 2015

FEC Identification Number: C

Transaction ID : EXPB3871

Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2015

FEC Identification Number: C

Transaction ID : EXPB3877

Amount of Each Disbursement this Period: 100.00

Memo Item

C. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 20 / 2015

FEC Identification Number: C

Transaction ID : EXPB3873

Amount of Each Disbursement this Period: 75.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2175.00

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)
Foundation for a Greater America, Inc.

A. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2015

FEC Identification Number: C

Transaction ID : EXPB3879

Amount of Each Disbursement this Period: 80.00

Memo Item

B. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 24 / 2015

FEC Identification Number: C

Transaction ID : EXPB3875

Amount of Each Disbursement this Period: 300.00

Memo Item

C. Hodgins, James P., , ,

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 3587

City Tustin State CA Zip Code 92781

Purpose of Disbursement Consulting Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 18 / 2015

FEC Identification Number: C

Transaction ID : EXPB928

Amount of Each Disbursement this Period: 700.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1080.00

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)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Hodgins, James P., , ,

Mailing Address P.O. Box 3587

City
Tustin

State
CA

Zip Code
92781

Purpose of Disbursement
Consulting Services

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB931

Amount of Each Disbursement this Period

[REDACTED] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Houston's

Mailing Address 2991 Michelson Drive

City
Irvine

State
CA

Zip Code
92612

Purpose of Disbursement
Committee Meeting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB1000

Amount of Each Disbursement this Period

[REDACTED] 272.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Microsoft Office 365

Mailing Address One Microsoft Way

City
Redmond

State
WA

Zip Code
98052

Purpose of Disbursement
Software Supplier

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	2		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB589

Amount of Each Disbursement this Period

[REDACTED] 140.00

Memo Item

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

[REDACTED] 912.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2015

FEC Identification Number: C

Transaction ID : EXPB652

Amount of Each Disbursement this Period: 140.00

Memo Item

B. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 03 / 2015

FEC Identification Number: C

Transaction ID : EXPB706

Amount of Each Disbursement this Period: 140.00

Memo Item

C. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2015

FEC Identification Number: C

Transaction ID : EXPB757

Amount of Each Disbursement this Period: 140.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 420.00

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)
Foundation for a Greater America, Inc.

A. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 01 / 2015

FEC Identification Number: C

Transaction ID : EXPB874

Amount of Each Disbursement this Period: 140.00

Memo Item

B. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2015

FEC Identification Number: C

Transaction ID : EXPB875

Amount of Each Disbursement this Period: 8.00

Memo Item

C. Microsoft Office 365

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Software Supplier

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2015

FEC Identification Number: C

Transaction ID : EXPB995

Amount of Each Disbursement this Period: 140.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 288.00

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)
Foundation for a Greater America, Inc.

A. Pacific West Asset Management Corporation

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 19068

City Irvine State CA Zip Code 92623

Purpose of Disbursement Office Rent

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 13 / 2015

FEC Identification Number: C

Transaction ID : EXPB3868

Amount of Each Disbursement this Period: 17828.00

Memo Item

B. Restaurant.com

Full Name (Last, First, Middle Initial)

Mailing Address 1500 West Shure Drive, Suite 600

City Arlington Heights State IL Zip Code 60004

Purpose of Disbursement Food & Beverages

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2015

FEC Identification Number: C

Transaction ID : EXPB1013

Amount of Each Disbursement this Period: 3003.59

Memo Item

C. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 05 / 2015

FEC Identification Number: C

Transaction ID : EXPB591

Amount of Each Disbursement this Period: 4.92

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	20836.51
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fees

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB597

Amount of Each Disbursement this Period

[REDACTED] 37.13

Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB598

Amount of Each Disbursement this Period

[REDACTED] 70.37

Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	5

FEC Identification Number

C [REDACTED]

Transaction ID : EXPB593

Amount of Each Disbursement this Period

[REDACTED] 20.00

Memo Item

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

[REDACTED] 127.50

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fees

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 12 / 2015

FEC Identification Number
C
Transaction ID : EXPB596
Amount of Each Disbursement this Period
21.44

Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 10 / 2015

FEC Identification Number
C
Transaction ID : EXPB669
Amount of Each Disbursement this Period
22.50

Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

001
Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 10 / 2015

FEC Identification Number
C
Transaction ID : EXPB670
Amount of Each Disbursement this Period
29.00

Memo Item

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

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

72.94

**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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 10 / 2015

FEC Identification Number

Transaction ID : EXPB667
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 10 / 2015

FEC Identification Number

Transaction ID : EXPB668
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement
Merchant Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 19 / 2015

FEC Identification Number

Transaction ID : EXPB671
Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

A. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2015

FEC Identification Number: C

Transaction ID : **EXPB708**

Amount of Each Disbursement this Period: 20.00

Memo Item

B. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2015

FEC Identification Number: C

Transaction ID : **EXPB713**

Amount of Each Disbursement this Period: 27.55

Memo Item

C. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2015

FEC Identification Number: C

Transaction ID : **EXPB711**

Amount of Each Disbursement this Period: 21.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 68.78

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 03 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB710
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 20.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB762
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 2.10
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB766
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 29.75
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	51.85
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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB765
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 24.83
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB764
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 21.45
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 04 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB763
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period 20.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

66.28

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB888
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period [REDACTED] 4.92
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB2686
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period [REDACTED] 2.18
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 05 / 05 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB2771
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		Amount of Each Disbursement this Period [REDACTED] 1.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 8.10
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2015

FEC Identification Number: C

Transaction ID : EXPB2775

Amount of Each Disbursement this Period: 50.00

Memo Item

B. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB905

Amount of Each Disbursement this Period: 178.89

Memo Item

C. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB903

Amount of Each Disbursement this Period: 82.35

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 311.24

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)
Foundation for a Greater America, Inc.

A. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB901

Amount of Each Disbursement this Period: 33.23

Memo Item

B. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2015

FEC Identification Number: C

Transaction ID : EXPB2779

Amount of Each Disbursement this Period: 83.92

Memo Item

C. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 02 / 2015

FEC Identification Number: C

Transaction ID : EXPB2837

Amount of Each Disbursement this Period: 9.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 126.79

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)
Foundation for a Greater America, Inc.

A. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2015

FEC Identification Number: C [REDACTED]
Transaction ID : EXPB1038
Amount of Each Disbursement this Period: [REDACTED] 7.15

Memo Item

B. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2015

FEC Identification Number: C [REDACTED]
Transaction ID : EXPB1040
Amount of Each Disbursement this Period: [REDACTED] 215.00

Memo Item

C. TransFirst, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee 001 Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 02 / 2015

FEC Identification Number: C [REDACTED]
Transaction ID : EXPB1036
Amount of Each Disbursement this Period: [REDACTED] 0.43

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ [REDACTED] 222.58

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB1043
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 75.36
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. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB1042
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 40.36
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. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB1044
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		001 Category/ Type
Candidate Name		Amount of Each Disbursement this Period 161.94
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).....▶	277.66
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 10 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB2845 Amount of Each Disbursement this Period [REDACTED] 110.68
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		<input type="checkbox"/> 001 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 15 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB1058 Amount of Each Disbursement this Period [REDACTED] 30.00
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		<input type="checkbox"/> 001 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TransFirst, LLC		Date of Disbursement MM / DD / YYYY 06 / 22 / 2015
Mailing Address 3131 South Vaughn Way, Suite 350		FEC Identification Number C [REDACTED] Transaction ID : EXPB2851 Amount of Each Disbursement this Period [REDACTED] 100.00
City Aurora	State CO	Zip Code 80014
Purpose of Disbursement Merchant Fee		<input type="checkbox"/> 001 Category/Type
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 240.68
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. TransFirst, LLC

Mailing Address 3131 South Vaughn Way, Suite 350

City Aurora State CO Zip Code 80014

Purpose of Disbursement Merchant Fee Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
06 / 25 / 2015

FEC Identification Number
C
Transaction ID : EXPB1060
 Amount of Each Disbursement this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement Bank Fee Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 06 / 2015

FEC Identification Number
C
Transaction ID : EXPB592
 Amount of Each Disbursement this Period
15.00

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement Bank Fee Category/Type **001**

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
01 / 13 / 2015

FEC Identification Number
C
Transaction ID : EXPB601
 Amount of Each Disbursement this Period
36.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... **76.00**

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	5

FEC Identification Number

Transaction ID : EXPB600
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	5

FEC Identification Number

Transaction ID : EXPB605
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	1	5

FEC Identification Number

Transaction ID : EXPB724
 Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB725
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB607
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB609
Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
02 / 09 / 2015

FEC Identification Number

Transaction ID : EXPB653
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2015

FEC Identification Number

Transaction ID : EXPB716
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
04 / 14 / 2015

FEC Identification Number

Transaction ID : EXPB776
Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2015

FEC Identification Number

C

Transaction ID : EXPB760

Amount of Each Disbursement this Period

44.00

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2015

FEC Identification Number

C

Transaction ID : EXPB908

Amount of Each Disbursement this Period

36.00

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2015

FEC Identification Number

C

Transaction ID : EXPB912

Amount of Each Disbursement this Period

5.00

Memo Item

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

85.00

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB884
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB885
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : EXPB992
Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	5

FEC Identification Number

Transaction ID : EXPB1014
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

FEC Identification Number

Transaction ID : EXPB1015
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	1	5

FEC Identification Number

Transaction ID : EXPB1017
 Amount of Each Disbursement this Period

Memo Item

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

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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 12 / 2015

FEC Identification Number

Transaction ID : EXPB1047
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address 16061 Brookhurst Street

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Bank Fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 17 / 2015

FEC Identification Number

Transaction ID : EXPB1025
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. Church, Judson A., , ,

Mailing Address 764 Pines Lake Drive West

City
Wayne

State
NJ

Zip Code
07470

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : PAYB3822
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Church, Judson A., , ,

Mailing Address 764 Pines Lake Drive West

City
Wayne

State
NJ

Zip Code
07470

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : PAYB3824
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Church, Judson A., , ,

Mailing Address 764 Pines Lake Drive West

City
Wayne

State
NJ

Zip Code
07470

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : PAYB4025
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. Church, Judson A., , ,		Date of Disbursement MM / DD / YYYY 06 / 03 / 2015
Mailing Address 764 Pines Lake Drive West		FEC Identification Number C Transaction ID : PAYB3973 Amount of Each Disbursement this Period 600.00
City Wayne	State NJ	
Zip Code 07470	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Coons, Mary E., , ,		Date of Disbursement MM / DD / YYYY 01 / 29 / 2015
Mailing Address 1155 Prospect Avenue		FEC Identification Number C Transaction ID : PAYB3953 Amount of Each Disbursement this Period 147000.00
City Hartford	State CT	
Zip Code 06105	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C Transaction ID : PAYB4029 Amount of Each Disbursement this Period 750.00
City Las Vegas	State NV	
Zip Code 89123	Purpose of Disbursement	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	148350.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: **C**

Transaction ID : PAYB3946

Amount of Each Disbursement this Period: 76.79

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: **C**

Transaction ID : PAYB3922

Amount of Each Disbursement this Period: 100.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: **C**

Transaction ID : PAYB3920

Amount of Each Disbursement this Period: 1050.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1226.79

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: **C**

Transaction ID : **PAYB4031**

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 01 / 30 / 2015

FEC Identification Number: **C**

Transaction ID : **PAYB3944**

Amount of Each Disbursement this Period: 555.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: 02 / 02 / 2015

FEC Identification Number: **C**

Transaction ID : **PAYB3932**

Amount of Each Disbursement this Period: 7900.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9455.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2015

FEC Identification Number: C

Transaction ID : PAYB3934

Amount of Each Disbursement this Period: 500.00

Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2015

FEC Identification Number: C

Transaction ID : PAYB3930

Amount of Each Disbursement this Period: 1450.00

Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2015

FEC Identification Number: C

Transaction ID : PAYB4033

Amount of Each Disbursement this Period: 1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

FEC Identification Number:
Transaction ID : PAYB3940
Amount of Each Disbursement this Period:
 Memo Item

B. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

FEC Identification Number:
Transaction ID : PAYB3938
Amount of Each Disbursement this Period:
 Memo Item

C. CrossClick Media, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 8725 S. Eastern Avenue, #200-661

City Las Vegas State NV Zip Code 89123

Purpose of Disbursement Category/Type

Candidate Name

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

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 17 / 2015

FEC Identification Number:
Transaction ID : PAYB3936
Amount of Each Disbursement this Period:
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial)

A. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	5

FEC Identification Number

C

Transaction ID : PAYB3942

Amount of Each Disbursement this Period

160.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

FEC Identification Number

C

Transaction ID : PAYB3828

Amount of Each Disbursement this Period

400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CrossClick Media, Inc.

Mailing Address 8725 S. Eastern Avenue, #200-661

City
Las Vegas

State
NV

Zip Code
89123

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	5

FEC Identification Number

C

Transaction ID : PAYB3834

Amount of Each Disbursement this Period

550.00

Memo Item

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

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

1110.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 04 / 30 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [] Transaction ID : PAYB3830 Amount of Each Disbursement this Period [] 450.00	
City Las Vegas	State NV	Zip Code 89123	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 05 / 04 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [] Transaction ID : PAYB3832 Amount of Each Disbursement this Period [] 750.00	
City Las Vegas	State NV	Zip Code 89123	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. CrossClick Media, Inc.		Date of Disbursement MM / DD / YYYY 05 / 07 / 2015	
Mailing Address 8725 S. Eastern Avenue, #200-661		FEC Identification Number C [] Transaction ID : PAYB3826 Amount of Each Disbursement this Period [] 500.00	
City Las Vegas	State NV	Zip Code 89123	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 1700.00
TOTAL This Period (last page this line number only).....▶	[] 214791.79

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input checked="" 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)
Foundation for a Greater America, Inc.

Full Name (Last, First, Middle Initial) A. Finiks Capital, LLC		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015	
Mailing Address 3625 W. MacArthur Blvd., #302		FEC Identification Number C [] Transaction ID : EXPB3957 Amount of Each Disbursement this Period [] 77400.00	
City Santa Ana	State CA	Zip Code 92704	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Finiks Capital, LLC		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015	
Mailing Address 3625 W. MacArthur Blvd., #302		FEC Identification Number C [] Transaction ID : EXPB3955 Amount of Each Disbursement this Period [] 1200.00	
City Santa Ana	State CA	Zip Code 92704	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

SUBTOTAL of Disbursements This Page (optional).....▶	[] 78600.00
TOTAL This Period (last page this line number only).....▶	[] 78600.00

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC3469**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Finiks Capital, LLC		<input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3625 W. MacArthur Blvd., #302			
City Santa Ana	State CA	ZIP Code 92704	

Original Amount of Loan 43813.34	Cumulative Payment To Date 23461.78	Balance Outstanding at Close of This Period 20351.56
-------------------------------------	--	---

TERMS

Date Incurred MM / DD / YYYY 11 / 17 / 2014	Date Due MM / DD / YYYY 11 / 17 / 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional)	▶	[] 20351.56
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC3461**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Finiks Capital, LLC		N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3625 W. MacArthur Blvd., #302			
City Santa Ana	State CA	ZIP Code 92704	

Original Amount of Loan 21100.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 21100.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred MM / DD / YYYY 11 / 18 / 2014	Date Due MM / DD / YYYY 11 / 18 / 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional)	▶	[] 21100.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC3501**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Finiks Capital, LLC			N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3625 W. MacArthur Blvd., #302				
City Santa Ana	State CA	ZIP Code 92704		

Original Amount of Loan 100000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 100000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred MM / DD / YYYY 11 / 18 / 2014	Date Due MM / DD / YYYY 05 / 18 / 2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional)	▶	100000.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC3956**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Finiks Capital, LLC		<input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3625 W. MacArthur Blvd., #302			
City Santa Ana	State CA	ZIP Code 92704	

Original Amount of Loan 1200.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1200.00
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TERMS

Date Incurred MM / DD / YYYY 01 / 30 / 2015	Date Due MM / DD / YYYY 01 / 30 / 2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 1200.00
TOTALS This Period (last page in this line only)	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : RCVC3958**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Finiks Capital, LLC		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3625 W. MacArthur Blvd., #302			
City Santa Ana	State CA	ZIP Code 92704	

Original Amount of Loan 77400.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 77400.00
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TERMS

Date Incurred MM / DD / YYYY 01 / 30 / 2015	Date Due MM / DD / YYYY 01 / 30 / 2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	77400.00
TOTALS This Period (last page in this line only)	▶	220051.56

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3820**
 Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Church, Judson A., , ,			<input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 764 Pines Lake Drive West				
City Wayne	State NJ	ZIP Code 07470		

Original Amount of Loan 250000.00	Cumulative Payment To Date 50250.00	Balance Outstanding at Close of This Period 199750.00
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TERMS

Date Incurred MM / DD / YYYY 01 / 27 / 2015	Date Due MM / DD / YYYY 11 / 23 / 2016	Interest Rate 15.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 199750.00
TOTALS This Period (last page in this line only)	▶	[]

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SC/10

Transaction ID : PAYC3820

Loan Received; See Schedule C

Form/Schedule:

Transaction ID:

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3348**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) Coons, Mary E., , ,		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1155 Prospect Avenue			
City Hartford	State CT	ZIP Code 06105	

Original Amount of Loan 200000.00	Cumulative Payment To Date 200000.00	Balance Outstanding at Close of This Period 0.00
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TERMS	Date Incurred MM / DD / YYYY 11 / 14 / 2014	Date Due MM / DD / YYYY 11 / 28 / 2014	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	0.00
TOTALS This Period (last page in this line only)	

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3739**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 100.00	Cumulative Payment To Date 100.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 12 / 10 / 2014	Date Due MM / DD / YYYY 12 / 10 / 2015	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 0.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3744**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661				
City Las Vegas	State NV	ZIP Code 89123		

Original Amount of Loan 3700.00	Cumulative Payment To Date 3700.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 12 / 17 / 2014	Date Due MM / DD / YYYY 12 / 17 / 2015	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 0.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3742**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 60.00	Cumulative Payment To Date 60.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 12 / 30 / 2014	Date Due MM / DD / YYYY 12 / 30 / 2015	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 0.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Foundation for a Greater America, Inc.** Transaction ID : **PAYC3814**

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 5.00	Cumulative Payment To Date 5.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 01 / 06 / 2015	Date Due MM / DD / YYYY 01 / 04 / 2016	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 0.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3812**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 26500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 26500.00
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TERMS

Date Incurred MM / DD / YYYY 05 / 13 / 2015	Date Due MM / DD / YYYY 11 / 30 / 2016	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 26500.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3816**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661				
City Las Vegas	State NV	ZIP Code 89123		

Original Amount of Loan 19000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 19000.00
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TERMS

Date Incurred MM / DD / YYYY 05 / 13 / 2015	Date Due MM / DD / YYYY 11 / 30 / 2016	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 19000.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3818**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661				
City Las Vegas	State NV	ZIP Code 89123		

Original Amount of Loan 13200.00	Cumulative Payment To Date 76.79	Balance Outstanding at Close of This Period 13123.21
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TERMS

Date Incurred MM / DD / YYYY 05 / 13 / 2015	Date Due MM / DD / YYYY 11 / 30 / 2016	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 13123.21
TOTALS This Period (last page in this line only)	▶	[]
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.		

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC4021**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 3000.00	Cumulative Payment To Date 3000.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 05 / 18 / 2015	Date Due MM / DD / YYYY 05 / 18 / 2016	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	[] 0.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC3810**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) CrossClick Media, Inc.		<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	ZIP Code 89123	

Original Amount of Loan 10600.00	Cumulative Payment To Date 10600.00	Balance Outstanding at Close of This Period 0.00
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TERMS

Date Incurred MM / DD / YYYY 06 / 03 / 2015	Date Due MM / DD / YYYY 11 / 30 / 2016	Interest Rate 10.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	[] 0.00
TOTALS This Period (last page in this line only)	[]

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC4009**
Foundation for a Greater America, Inc.

LOAN SOURCE Full Name (Last, First, Middle Initial) MCKEA Holdings, Inc.			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address P.O. Box 3587				
City Tustin	State CA	ZIP Code 92871		

Original Amount of Loan 400.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 400.00
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TERMS

Date Incurred MM / DD / YYYY 10 / 22 / 2014	Date Due MM / DD / YYYY 04 / 21 / 2015	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	▶	400.00
TOTALS This Period (last page in this line only)	▶	258773.21

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 84 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.			Nature of Debt (Purpose): Card Processing & Web Design Services
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period 2550.00	Transaction ID : PAYD3515	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2550.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.			Nature of Debt (Purpose): Merchant Fees
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period 0.99	Transaction ID : PAYD3805	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.			Nature of Debt (Purpose): Card Processing & Web Design Services
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period 20000.00	Transaction ID : PAYD3807	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	22550.99
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 85 OF 98
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.			Nature of Debt (Purpose): Merchant Fees
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period		Transaction ID : PAYD3961	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.99"/>	<input type="text" value="0.00"/>	<input type="text" value="0.99"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Aristotle International, Inc.			Nature of Debt (Purpose): Merchant Fees
Mailing Address 205 Pennsylvania Avenue SE			
City Washington	State DC	Zip Code 20003	

Outstanding Balance Beginning This Period		Transaction ID : PAYD3966	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.99"/>	<input type="text" value="0.00"/>	<input type="text" value="0.99"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ault III, Milton C., , ,			Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address 13101 Cottonwood			
City Santa Ana	State CA	Zip Code 92705	

Outstanding Balance Beginning This Period		Transaction ID : PAYD3808	
<input type="text" value="209.50"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="209.50"/>	<input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1.98"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 86 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ault III, Milton C., , ,			Nature of Debt (Purpose): Strategic Planning Consulting
Mailing Address 13101 Cottonwood			
City Santa Ana	State CA	Zip Code 92705	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : PAYD3968	
Amount Incurred This Period <input type="text" value="1709.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1709.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ault, Anastasia, , ,			Nature of Debt (Purpose): Office Supplies
Mailing Address 8686 Merced Circle, Unit 1007 D			
City Costa Mesa	State CA	Zip Code 92626	

Outstanding Balance Beginning This Period <input type="text" value="12.71"/>	Transaction ID : PAYD2231	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12.71"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ault, Anastasia, , ,			Nature of Debt (Purpose): Office Supplies
Mailing Address 8686 Merced Circle, Unit 1007 D			
City Costa Mesa	State CA	Zip Code 92626	

Outstanding Balance Beginning This Period <input type="text" value="28.80"/>	Transaction ID : PAYD2696	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="28.80"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1751.01"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 87 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ault, Anastasia, , ,			Nature of Debt (Purpose): Postage
Mailing Address 8686 Merced Circle, Unit 1007 D			
City Costa Mesa	State CA	Zip Code 92626	

Outstanding Balance Beginning This Period <input type="text" value="19.60"/>	Transaction ID : PAYD3509	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="19.60"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cane, Kyleen, , ,			Nature of Debt (Purpose): Merchant Fees
Mailing Address 3273 East Warm Springs Road			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period <input type="text" value="75.46"/>	Transaction ID : PAYD2448	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="75.46"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cane, Kyleen, , ,			Nature of Debt (Purpose): Merchant Fees
Mailing Address 3273 East Warm Springs Road			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period <input type="text" value="66.72"/>	Transaction ID : PAYD2451	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="66.72"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="161.78"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 88 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cane, Kyleen, , ,			Nature of Debt (Purpose): Merchant Fees
Mailing Address 3273 East Warm Springs Road			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period <input type="text" value="57.82"/>	Transaction ID : PAYD2455	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="57.82"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cane, Kyleen, , ,			Nature of Debt (Purpose): Loan Fee
Mailing Address 3273 East Warm Springs Road			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period <input type="text" value="450.00"/>	Transaction ID : PAYD3792	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="450.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cane, Kyleen, , ,			Nature of Debt (Purpose): Loan Interest
Mailing Address 3273 East Warm Springs Road			
City Henderson	State NV	Zip Code 89014	

Outstanding Balance Beginning This Period <input type="text" value="820.87"/>	Transaction ID : PAYD3793	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="820.87"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1328.69"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 89 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Church, Judson A., , ,			Nature of Debt (Purpose): Loan Interest Payment
Mailing Address 764 Pines Lake Drive West			
City Wayne	State NJ	Zip Code 07470	

Outstanding Balance Beginning This Period	Transaction ID : PAYD3969	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="362.00"/>	<input type="text" value="0.00"/>	<input type="text" value="362.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)			Nature of Debt (Purpose): Corporate Document Services
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period	Transaction ID : PAYD1965	
<input type="text" value="552.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="200.00"/>	<input type="text" value="352.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)			Nature of Debt (Purpose): Interest Fee
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period	Transaction ID : PAYD2235	
<input type="text" value="33.84"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="33.84"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="747.84"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 90 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)		Nature of Debt (Purpose): Interest Fee	
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period 24.12		Transaction ID : PAYD2701	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.12	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)		Nature of Debt (Purpose): Interest Fee	
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period 8.28		Transaction ID : PAYD3324	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)		Nature of Debt (Purpose): Interest Fee	
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period 8.28		Transaction ID : PAYD3512	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8.28	

1) SUBTOTALS This Period This Page (optional)..... ▶	40.68
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 91 OF 98
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)		Nature of Debt (Purpose): Interest Fee	
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period		Transaction ID : PAYD3806	
15.84			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	15.84	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Corporation Service Company (CSC)		Nature of Debt (Purpose): Interest Fee	
Mailing Address P.O. Box 13397			
City Philadelphia	State PA	Zip Code 19101	

Outstanding Balance Beginning This Period		Transaction ID : PAYD3967	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
9.00	0.00	9.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc.		Nature of Debt (Purpose): Call Center	
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	Zip Code 89123	

Outstanding Balance Beginning This Period		Transaction ID : PAYD2240	
24779.38			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	24779.38	0.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	24.84
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 92 OF 98
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc.			Nature of Debt (Purpose): Rent, Phone, Utilities & Callers
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	Zip Code 89123	

Outstanding Balance Beginning This Period <input type="text" value="3630.62"/>	Transaction ID : PAYD3513	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3630.62"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc.			Nature of Debt (Purpose): Technology & Administrative Services
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	Zip Code 89123	

Outstanding Balance Beginning This Period <input type="text" value="11078.21"/>	Transaction ID : PAYD3514	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="11078.21"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CrossClick Media, Inc.			Nature of Debt (Purpose): Call Center
Mailing Address 8725 S. Eastern Avenue, #200-661			
City Las Vegas	State NV	Zip Code 89123	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : PAYD3962	
Amount Incurred This Period <input type="text" value="62747.69"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="62747.69"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="62747.69"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 93 OF 98
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period <input type="text" value="2475.00"/>	Transaction ID : PAYD2189	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2475.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Office Supplies
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period <input type="text" value="9.05"/>	Transaction ID : PAYD2221	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9.05"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period <input type="text" value="4500.00"/>	Transaction ID : PAYD2693	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="80.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4420.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="4429.05"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 94 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : PAYD3322	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : PAYD3510	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period 1500.00	Transaction ID : PAYD3804	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	4500.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 95 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hodgins, James P., , ,			Nature of Debt (Purpose): Consulting Services
Mailing Address P.O. Box 3587			
City Tustin	State CA	Zip Code 92781	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD3959	
Amount Incurred This Period 9000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor InFind.com, Inc.			Nature of Debt (Purpose): Management Consulting Services
Mailing Address 12021 Wilshire Blvd., Suite 634			
City Los Angeles	State CA	Zip Code 90025	

Outstanding Balance Beginning This Period 6100.00	Transaction ID : PAYD1975	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor InFind.com, Inc.			Nature of Debt (Purpose): Management Consulting Services
Mailing Address 12021 Wilshire Blvd., Suite 634			
City Los Angeles	State CA	Zip Code 90025	

Outstanding Balance Beginning This Period 20000.00	Transaction ID : PAYD2183	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 20000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	35100.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 96 OF 98
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jeff Taylor Graphics			Nature of Debt (Purpose): Design of Logo, Letterhead and Envelopes
Mailing Address 2633 Lincoln Blvd., Suite 837			
City Santa Monica	State CA	Zip Code 90405	

Outstanding Balance Beginning This Period <input type="text" value="2075.00"/>	Transaction ID : PAYD2201	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2075.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Cowan Law			Nature of Debt (Purpose): Legal Services
Mailing Address 100 Pine Street, Suite 1250			
City San Francisco	State CA	Zip Code 94111	

Outstanding Balance Beginning This Period <input type="text" value="15550.15"/>	Transaction ID : PAYD1976	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15550.15"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Propel Management Group, Inc.			Nature of Debt (Purpose): Consulting Services for Call Center
Mailing Address 3625 W. Macarthur Blvd., #302.			
City Santa Ana	State CA	Zip Code 92704	

Outstanding Balance Beginning This Period <input type="text" value="726.78"/>	Transaction ID : PAYD2239	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="726.78"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="18351.93"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 97 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Propel Management Group, Inc.			Nature of Debt (Purpose): Professional Services
Mailing Address 3625 W. Macarthur Blvd., #302.			
City Santa Ana	State CA	Zip Code 92704	

Outstanding Balance Beginning This Period <input type="text" value="129.55"/>	Transaction ID : PAYD3507	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="129.55"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Spaziano, Joe, , ,			Nature of Debt (Purpose): Computer Services
Mailing Address 1928 E. Van Owen Avenue, Apt. A			
City Orange	State CA	Zip Code 92867	

Outstanding Balance Beginning This Period <input type="text" value="80.96"/>	Transaction ID : PAYD3516	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="80.96"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor State of California-Franchise Tax Board			Nature of Debt (Purpose): Penalty Fee
Mailing Address P.O. Box 942857			
City Sacramento	State CA	Zip Code 94257	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : PAYD3963	
Amount Incurred This Period <input type="text" value="250.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="460.51"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 98 OF 98
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Foundation for a Greater America, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice, LLP			Nature of Debt (Purpose): Legal Services
Mailing Address 1200 19th Street NW, Suite 500			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period		Transaction ID : PAYD2208	
12264.92			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	12264.92	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Womble Carlyle Sandridge & Rice, LLP			Nature of Debt (Purpose): Legal Services
Mailing Address 1200 19th Street NW, Suite 500			
City Washington	State DC	Zip Code 20036	

Outstanding Balance Beginning This Period		Transaction ID : PAYD2722	
436.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	436.00	

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

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

1) SUBTOTALS This Period This Page (optional)..... ▶	12700.92
2) TOTALS This Period (last page this line number only)..... ▶	164897.91
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	258773.21
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	423671.12