

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

ADDRESS (number and street) 2101 WILSON BOULEVARD SUITE 400 Arlington VA 22201

2. FEC IDENTIFICATION NUMBER C00325324 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 10 / 01 / 2015 through 10 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer John Hollay

Signature of Treasurer John Hollay [Electronically Filed] Date 11 / 20 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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="34809.64"/>	<input type="text" value="34809.64"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41521.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1029.26"/>	<input type="text" value="39041.47"/>
(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="42550.43"/>	<input type="text" value="73851.11"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1000.00"/>	<input type="text" value="34998.52"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="41550.43"/>	<input type="text" value="38852.59"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	776.00	21781.00
(ii) Unitemized	253.26	2759.98
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1029.26	24540.98
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	14500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1029.26	39040.98
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.49
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
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))..... ▶	1029.26	39041.47
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1029.26	39041.47

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	0.00	498.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	498.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	34500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	1000.00	34998.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	34998.52

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)	1029.26	39040.98
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1029.26	39040.98
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	498.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	498.03

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

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

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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. John Hollay
 Full Name (Last, First, Middle Initial)
 Mailing Address 1021 N. Garfield #222
 City Arlington State VA Zip Code 22201-2555
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **680.00**

Date of Receipt **10 / 15 / 2015**
Transaction ID : AE69E3DC720CD47F983E
 Amount of Each Receipt this Period **40.00**

B. Christopher W. Galen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3903 Shelley Lane
 City Annandale State VA Zip Code 22003-2234
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Senior Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **510.00**

Date of Receipt **10 / 15 / 2015**
Transaction ID : A5CCF4228798F471391B
 Amount of Each Receipt this Period **30.00**

C. Peter Vitaliano
 Full Name (Last, First, Middle Initial)
 Mailing Address 6303 North 28th St
 City Arlington State VA Zip Code 22207-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1105.00**

Date of Receipt **10 / 15 / 2015**
Transaction ID : A91005212C2544056ADA
 Amount of Each Receipt this Period **65.00**

SUBTOTAL of Receipts This Page (optional)..... **135.00**
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 12
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jamie S. Jonker
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Corcoran Street Nw Apt. 1
Apt 1

City Washington State DC Zip Code 20009-2415

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

Name of Employer National Milk Producers Federation Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt **10 / 15 / 2015**

Transaction ID : AC62592DFE13A4D59984

Amount of Each Receipt this Period **50.00**

B. Shawna D. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 3 Hickory Hill Court

City Silver Spring State MD Zip Code 20906-5807

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

Name of Employer National Milk Producers Federation Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **289.00**

Date of Receipt **10 / 15 / 2015**

Transaction ID : A9A2CBF57CD26427684C

Amount of Each Receipt this Period **17.00**

C. Tom M Balmer
Full Name (Last, First, Middle Initial)

Mailing Address 310 Cloverway Drive

City Alexandria State VA Zip Code 22314-4841

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

Name of Employer National Milk Producers Federation Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1411.00**

Date of Receipt **10 / 15 / 2015**

Transaction ID : A5B87E5AE54E1418AAA3

Amount of Each Receipt this Period **83.00**

SUBTOTAL of Receipts This Page (optional)..... **150.00**

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 8 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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

Mailing Address 8000 Inverness Ridge Rd.

City Potomac	State MD	Zip Code 20854-4011
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FEC ID number of contributing federal political committee. **C**

Name of Employer National Milk Producers Federation	Occupation Chief Operating Officer
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1577.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : A799DB2ACE4494F0BBCE

Amount of Each Receipt this Period
83.00

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

Mailing Address 1805 Abbey Oak Drive

City Vienna	State VA	Zip Code 22182-1904
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FEC ID number of contributing federal political committee. **C**

Name of Employer National Milk Producers Federation	Occupation Senior Vice President
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2015

Transaction ID : A8E1E57F20B97495087C

Amount of Each Receipt this Period
20.00

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

Mailing Address 1805 Abbey Oak Drive

City Vienna	State VA	Zip Code 22182-1904
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FEC ID number of contributing federal political committee. **C**

Name of Employer National Milk Producers Federation	Occupation Senior Vice President
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2015

Transaction ID : A4CC2890BEEFB4DB0B86

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....▶	123.00
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 12
	<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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jim Mulhern
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 Inverness Ridge Rd.
 City Potomac State MD Zip Code 20854-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : A5C8734A276154B6B83D
 Amount of Each Receipt this Period
 83.00

B. Tom M Balmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Cloverway Drive
 City Alexandria State VA Zip Code 22314-4841
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1494.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : A8B2ED128DBD24A27AA4
 Amount of Each Receipt this Period
 83.00

C. Shawna D. Morris
 Full Name (Last, First, Middle Initial)
 Mailing Address 3 Hickory Hill Court
 City Silver Spring State MD Zip Code 20906-5807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 306.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2015
Transaction ID : A190D573640104F92823
 Amount of Each Receipt this Period
 17.00

SUBTOTAL of Receipts This Page (optional).....▶	183.00
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 12
<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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jamie S. Jonker
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Corcoran Street Nw Apt. 1
Apt 1

City Washington State DC Zip Code 20009-2415

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

Name of Employer National Milk Producers Federation Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
10 / 30 / 2015
Transaction ID : **A0EB5FA3DD0674E76B8F**

Amount of Each Receipt this Period
50.00

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

Mailing Address 6303 North 28th St

City Arlington State VA Zip Code 22207-1111

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

Name of Employer National Milk Producers Federation Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1170.00

Date of Receipt
10 / 30 / 2015
Transaction ID : **AC276A197AB3E40308F4**

Amount of Each Receipt this Period
65.00

c. Christopher W. Galen
Full Name (Last, First, Middle Initial)

Mailing Address 3903 Shelley Lane

City Annandale State VA Zip Code 22003-2234

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

Name of Employer National Milk Producers Federation Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt
10 / 30 / 2015
Transaction ID : **A4F6D07558774EF0928**

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00

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 11 OF 12
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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

Mailing Address 1021 N. Garfield #222

City Arlington	State VA	Zip Code 22201-2555
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FEC ID number of contributing federal political committee. **C**

Name of Employer National Milk Producers Federation	Occupation Vice President
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	30	/	2015

Transaction ID : A40B3BB9B52A642008E5

Amount of Each Receipt this Period
40.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	40.00
TOTAL This Period (last page this line number only).....▶	776.00

**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)		PAGE 12 OF 12			
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial) A. Friends of Glenn Thompson		Date of Disbursement MM / DD / YYYY 10 / 21 / 2015
Mailing Address PO Box 1112		Transaction ID : B1A064CA1FAB04C529E6
City State College	State PA	
Purpose of Disbursement	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name Rep. Glenn W. Thompson Jr.	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 05		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	<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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	<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).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00