

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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"/>		19217.64
(b) Cash on Hand at Beginning of Reporting Period.....	24559.90	
(c) Total Receipts (from Line 19)	818.84	40510.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	25378.74	59728.01
7. Total Disbursements (from Line 31).....	2539.45	36888.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	22839.29	22839.29
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

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	26096.00
(ii) Unitemized	42.84	2413.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	818.84	28509.88
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	12000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	818.84	40509.88
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))..... ▶	818.84	40510.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	818.84	40510.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	39.45	388.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	39.45	388.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	36500.00
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)) ..	2539.45	36888.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2539.45	36888.72

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	818.84	40509.88
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	818.84	40509.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	39.45	388.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39.45	388.23

**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 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. 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 ▼ 1079.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : A89E6932003A64074B7E
 Amount of Each Receipt this Period
 83.00

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 ▼ 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : A720B89D662014E448AE
 Amount of Each Receipt this Period
 17.00

C. 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 ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : A45342F2C413C47DAB8A
 Amount of Each Receipt this Period
 50.00

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: (check only one)	PAGE 7 OF 13
	<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. 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 ▼ 390.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : AE9D2F9B42CD048F7899
 Amount of Each Receipt this Period
 30.00

B. 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 ▼ 1162.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : AE13124A9E04144CFAE9
 Amount of Each Receipt this Period
 83.00

C. Jaime Castaneda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1805 Abbey Oak Drive
 City Vienna State VA Zip Code 22182-1904
 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 ▼ 260.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2015
Transaction ID : A4E567A2D86604B9C9CD
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	133.00
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 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. 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 ▼ 845.00

Date of Receipt 07 / 15 / 2015
Transaction ID : A57D92FF08E8B4655885
 Amount of Each Receipt this Period 65.00

B. 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 ▼ 520.00

Date of Receipt 07 / 15 / 2015
Transaction ID : A53E663DB985E4CC4892
 Amount of Each Receipt this Period 40.00

C. 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 ▼ 560.00

Date of Receipt 07 / 31 / 2015
Transaction ID : A87B18CE4EF96408E92B
 Amount of Each Receipt this Period 40.00

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: (check only one)	PAGE 9 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. 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 ▼ 910.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : AECA81F62CFE14363B56
 Amount of Each Receipt this Period
 65.00

B. Jaime Castaneda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1805 Abbey Oak Drive
 City Vienna State VA Zip Code 22182-1904
 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 ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : A0A2E816EAE3146E4970
 Amount of Each Receipt this Period
 20.00

C. 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 ▼ 1245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 31 / 2015
Transaction ID : A3230698F25274D4B8CD
 Amount of Each Receipt this Period
 83.00

SUBTOTAL of Receipts This Page (optional).....▶	168.00
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 13
	<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. 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 ▼ 420.00

Date of Receipt 07 / 31 / 2015
Transaction ID : A53BDF657CC204C5EB6F
 Amount of Each Receipt this Period 30.00

B. 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 ▼ 700.00

Date of Receipt 07 / 31 / 2015
Transaction ID : A7886D9AE530B4A42AC4
 Amount of Each Receipt this Period 50.00

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 ▼ 1162.00

Date of Receipt 07 / 31 / 2015
Transaction ID : A6C9674C0FFDE4D51B5B
 Amount of Each Receipt this Period 83.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 163.00
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 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

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 ▼
 238.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2015

Transaction ID : AB1E67B4E496F4D69830

Amount of Each Receipt this Period
 17.00

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 Y Y

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 Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	17.00
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)

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

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

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

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 Y Y
07 / 09 / 2015

Transaction ID : B6D35A2984A484465845

Amount of Each Disbursement this Period

0.90

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

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 Y Y
07 / 10 / 2015

Transaction ID : B32078284F66F4FB59

Amount of Each Disbursement this Period

38.55

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

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 Y Y

Amount of Each Disbursement this Period

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

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

39.45

39.45

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. Ribble for Congress

Mailing Address PO BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement

Candidate Name
Rep. Reid J. Ribble

Office Sought: House
 Senate
 President
State: WI District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	14	/	2015

Transaction ID : B7949B1B490A94577A7B

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2500.00

2500.00
