

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.

12FE4M5

TURNING POINT AMERICA PAC INC

ADDRESS (number and street)

P.O. BOX 6081

Check if different than previously reported. (ACC)

ANNAPOLIS

MD

21401

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C C00579201

3. IS THIS REPORT



NEW (N) OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

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

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

Election on

MM / DD / YYYY

in the State of

AA

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

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

Election on

MM / DD / YYYY

in the State of

AA

5. Covering Period

MM / DD / YYYY 01 / 01 / 2016

through

MM / DD / YYYY 03 / 31 / 2016

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 Brian M. Davis

Signature of Treasurer

Brian M. Davis

[Electronically Filed]

Date

MM / DD / YYYY 04 / 15 / 2016

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

TURNING POINT AMERICA PAC 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="2016"/>	<input type="text" value="23359.21"/>	<input type="text" value="23359.21"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23359.21"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="18525.00"/>	<input type="text" value="18525.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="41884.21"/>	<input type="text" value="41884.21"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="34792.55"/>	<input type="text" value="34792.55"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="7091.66"/>	<input type="text" value="7091.66"/>
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

TURNING POINT AMERICA PAC INC

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).....	8500.00	8500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8500.00	8500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	18500.00	18500.00
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).....	25.00	25.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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))..... ▶	18525.00	18525.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	18525.00	18525.00

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	34792.55	34792.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	34792.55	34792.55
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 (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)) ..	34792.55	34792.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34792.55	34792.55

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)	18500.00	18500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18500.00	18500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	34792.55	34792.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	25.00	25.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	34767.55	34767.55

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

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

NAME OF COMMITTEE (In Full)
TURNING POINT AMERICA PAC INC

A. Kenneth W. Barrett
 Full Name (Last, First, Middle Initial)
 Mailing Address 102 Llewellyn Road
 City Montclair State NJ Zip Code 07042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scotia Capital Occupation Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 01 / 04 / 2016
Transaction ID : SA11AI.4274
 Amount of Each Receipt this Period 1000.00
 Memo Item
 Contribution

B. Jason B. Dudderar
 Full Name (Last, First, Middle Initial)
 Mailing Address 4719 Ruby Avenue
 City Halethorpe State MD Zip Code 21227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 19 / 2016
Transaction ID : SA11AI.4280
 Amount of Each Receipt this Period 250.00
 Memo Item
 Contribution

C. Robert L. Ehrlich Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 2016 Monticello Drive
 City Annapolis State MD Zip Code 21401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer King & Spalding LLP Occupation Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 03 / 2016
Transaction ID : SA11AI.4282
 Amount of Each Receipt this Period 1500.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	2750.00
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 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
TURNING POINT AMERICA PAC INC

A. Martin Johnson
Full Name (Last, First, Middle Initial)

Mailing Address 1818 Riverside Drive

City State Zip Code
Trenton NJ 08618

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

Name of Employer Occupation
Isles, Inc. President

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
01 / 04 / 2016

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period
250.00

Memo Item
Contribution

B. John M. Obradovic
Full Name (Last, First, Middle Initial)

Mailing Address 763 Ticonderoga Avenue

City State Zip Code
Severna Park MD 21146

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SA11AI.4283

Amount of Each Receipt this Period
500.00

Memo Item
Contribution

C. Mayo A. Shattuck
Full Name (Last, First, Middle Initial)

Mailing Address 1190 Turtle Beach Road
A103

City State Zip Code
North Palm Beach FL 33408

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
01 / 04 / 2016

Transaction ID : SA11AI.4278

Amount of Each Receipt this Period
5000.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	8500.00

**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 11
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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

NAME OF COMMITTEE (In Full)
TURNING POINT AMERICA PAC INC

Full Name (Last, First, Middle Initial)
A. The Council of Insurance Agents & Brokers Political Action Committee

Mailing Address 701 Pennsylvania Avenue, NW
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
02 / 19 / 2016

Transaction ID : SA11C.4287

Amount of Each Receipt this Period
10000.00

Memo Item Contribution

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

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	10000.00

**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

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)
TURNING POINT AMERICA PAC INC

Full Name (Last, First, Middle Initial)

A. Robert L. Ehrlich Jr.

Mailing Address 2016 Monticello Drive

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
Reimbursement for expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4296

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. King & Spalding LLP

Mailing Address 1700 Pennsylvania Avenue, NW
Suite 200

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4309

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Consulting services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4291

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

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

NAME OF COMMITTEE (In Full)
TURNING POINT AMERICA PAC INC

Full Name (Last, First, Middle Initial)

A. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Reimbursement for expenses

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4293

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Consulting services

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4297

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Reimbursement for expenses

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4298

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

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

NAME OF COMMITTEE (In Full)
TURNING POINT AMERICA PAC INC

Full Name (Last, First, Middle Initial)

A. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Consulting services

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4301

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Joseph P. Marzullo

Mailing Address P. O. Box 2218

City Hillsborough State NH Zip Code 03244

Purpose of Disbursement
Reimbursement for expenses

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2016

Transaction ID : SB21B.4302

Amount of Each Disbursement this Period

717.62

Memo Item

Full Name (Last, First, Middle Initial)

C. Maury Donnelly & Parr, Inc.

Mailing Address 24 Commerce Street

City Baltimore State MD Zip Code 21202

Purpose of Disbursement
Insurance

001

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2016

Transaction ID : SB21B.4308

Amount of Each Disbursement this Period

5079.00

Memo Item

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

9796.62

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

34542.23