

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.
Crowley Maritime Corporation Federal PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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

Signature of Treasurer Mr. Arthur Mead III [Electronically Filed] Date / /

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)

Write or Type Committee Name

Crowley Maritime Corporation Federal 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=""/>	<input type="text" value="65621.80"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="70712.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="3839.32"/>	<input type="text" value="16605.46"/>
(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="74551.83"/>	<input type="text" value="82227.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="5587.89"/>	<input type="text" value="13263.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="68963.94"/>	<input type="text" value="68963.94"/>
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

Write or Type Committee Name

Crowley Maritime Corporation Federal 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).....	2017.32	8867.32
(ii) Unitemized	1822.00	7738.14
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	3839.32	16605.46
(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)	3839.32	16605.46
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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))..... ▶	3839.32	16605.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3839.32	16605.46

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	87.89	263.32
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	87.89	263.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5500.00	13000.00
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)) ..	5587.89	13263.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5587.89	13263.32

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)	3839.32	16605.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3839.32	16605.46
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	87.89	263.32
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	87.89	263.32

**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"/> 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)
Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)
A. Allen Busch

Mailing Address 6560 NW 95th Lane

City Parkland State FL Zip Code 33076

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

Name of Employer Vessel Management Services Inc Occupation Senior VP & General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA11AI.12130

Amount of Each Receipt this Period **100.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Mr. John Calvin Jr.

Mailing Address 1925 Sevilla Boulevard, W.

City Atlantic Beach State FL Zip Code 32233

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

Name of Employer Crowley Maritime Corporation Occupation Senior Vice President & Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA11AI.12131

Amount of Each Receipt this Period **150.00**

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Owen R Clarke

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Staff

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **249.96**

Date of Receipt **03 / 31 / 2015**

Transaction ID : SA11AI.12134

Amount of Each Receipt this Period **83.32**

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	333.32
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 7 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)
A. Coleman Cosgrove

Mailing Address 12675 Ft. Caroline Rd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Vice President SSQE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.12136

Amount of Each Receipt this Period
80.00

Payroll Deduction

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

Mailing Address 1301 1st St. S.

City Jacksonville Beach State FL Zip Code 32250

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

Name of Employer Crowley Maritime Corporation Occupation Vice President Labor Relations

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
03 / 31 / 2015

Transaction ID : SA11AI.12138

Amount of Each Receipt this Period
200.00

Payroll Deduction

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

Mailing Address 501 Cane Mill Court

City Ponte Vedra Beach State FL Zip Code 32082

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

Name of Employer Crowley Maritime Corporation Occupation Director of Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.12146

Amount of Each Receipt this Period
100.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ **380.00**

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"/> 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)
Crowley Maritime Corporation Federal PAC

A. Robert Grune
Full Name (Last, First, Middle Initial)

Mailing Address 6576 163rd Place, SE

City Bellevue	State WA	Zip Code 98006
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Liner Services Inc.	Occupation Senior VP & General Manager
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA11AI.12149

Amount of Each Receipt this Period

100.00

Payroll Deduction

B. Mr. John Hourihan
Full Name (Last, First, Middle Initial)

Mailing Address 12534 Mission Hills Circle, S

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Liner Services, Inc.	Occupation Senior Vice President & General Manage
--	--

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
03	/	31	/	2015

Transaction ID : SA11AI.12153

Amount of Each Receipt this Period

200.00

Payroll Deduction

C. Edward R LaGoy
Full Name (Last, First, Middle Initial)

Mailing Address 9487 Regency Square Blvd

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer Crowley Maritime Corporation	Occupation Employee
--	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

Transaction ID : SA11AI.12159

Amount of Each Receipt this Period

90.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	390.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 9 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)
A. Francis Larkin

Mailing Address 9487 Regency Square Blvd

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Employee

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 252.00

Date of Receipt
 03 / 31 / 2015
Transaction ID : SA11AI.12160

Amount of Each Receipt this Period
 84.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Mr. William Pennella

Mailing Address 15 Heritage Oak Court

City Alamo State CA Zip Code 94507

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

Name of Employer Crowley Maritime Corporation Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 03 / 31 / 2015
Transaction ID : SA11AI.12180

Amount of Each Receipt this Period
 250.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Michael G. Roberts

Mailing Address 9487 Regency Square Boulevard

City Jacksonville State FL Zip Code 32225

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

Name of Employer Crowley Maritime Corporation Occupation Senior Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1200.00

Date of Receipt
 03 / 31 / 2015
Transaction ID : SA11AI.12182

Amount of Each Receipt this Period
 400.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 734.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Crowley Maritime Corporation Federal PAC

A. Julia Shemesh
 Full Name (Last, First, Middle Initial)
 Mailing Address 7720 A Island View Court
 City Mukilteo State WA Zip Code 98275
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crowley Maritime Corporation Occupation Senior Corporate Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA11AI.12185
 Amount of Each Receipt this Period 100.00
 Payroll Deduction

B. Mr. Rockwell Smith
 Full Name (Last, First, Middle Initial)
 Mailing Address 80 Prospect Terracce
 City Tenafly State NJ Zip Code 07670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Marine Transport Management Occupation Senior Vice President and General Mana
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 31 / 2015
Transaction ID : SA11AI.12187
 Amount of Each Receipt this Period 80.00
 Payroll Deduction

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
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	180.00
TOTAL This Period (last page this line number only).....▶	2017.32

**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)

Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 1 Independent Drive

City Jacksonville State FL Zip Code 32202

Purpose of Disbursement
Bank Charge

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
03 / 11 / 2015

Transaction ID : SB21B.12211

Amount of Each Disbursement this Period

87.89

Full Name (Last, First, Middle Initial)

B.

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

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)..... ▶

87.89

87.89

**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)

Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN THUNE

Mailing Address 200 NORTH PHILLIPS AVENUE STE L101

City SIOUX FALLS State SD Zip Code 57104

Purpose of Disbursement
Political Contribution

Candidate Name

FRIENDS OF JOHN THUNE

Office Sought: House
 Senate
 President
State: SD District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2015

Transaction ID : SB23.12203

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. MICA FOR CONGRESS

Mailing Address P. O. Box 181546

City Casselberry State FL Zip Code 32718

Purpose of Disbursement
Political Contribution

Candidate Name

MICA FOR CONGRESS

Office Sought: House
 Senate
 President
State: FL District: 07

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SB23.12204

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

Purpose of Disbursement
Political Contribution

Candidate Name

SCALISE FOR CONGRESS

Office Sought: House
 Senate
 President
State: LA District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2015

Transaction ID : SB23.12207

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

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 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)

Crowley Maritime Corporation Federal PAC

Full Name (Last, First, Middle Initial)

A. Shuster for Congress

Mailing Address P.O. Box 27

City Holidayburg State PA Zip Code 16648

Purpose of Disbursement
Political Contribution

Candidate Name

WILLIAM MR. SHUSTER

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2015

Transaction ID : SB23.12198

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

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
-------	---	-------	---	-------------

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)..... ▶

1000.00

5500.00
