

# 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

**ZUFFA POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) 2350 KERNER BLVD., SUITE 250

Check if different than previously reported. (ACC)

SAN RAFAEL CA 94901

2. **FEC IDENTIFICATION NUMBER ▼** C00459693 **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:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE-Election** Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on MM / DD / YYYYYY in the State of   

- (d) 30-Day **POST-Election** Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on MM / DD / YYYYYY in the State of   

5. Covering Period MM / DD / YYYYYY through MM / DD / YYYYYY

01 / 01 / 2015 through 06 / 30 / 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 STEVEN S. LUCAS

Signature of Treasurer STEVEN S. LUCAS *[Electronically Filed]* Date MM / DD / YYYYYY

01 / 26 / 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								
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**ZUFFA POLITICAL ACTION COMMITTEE**

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="9054.19"/>	<input type="text" value="9054.19"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9054.19"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="51860.00"/>	<input type="text" value="51860.00"/>
(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="60914.19"/>	<input type="text" value="60914.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25646.10"/>	<input type="text" value="25646.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="35268.09"/>	<input type="text" value="35268.09"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="1386.98"/>	

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

**ZUFFA POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 01 / 01 / 2015 To: M M / D D / Y Y Y Y Y 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).....	51500.00	51500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	51500.00	51500.00
(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) .....	51500.00	51500.00
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).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	360.00	360.00
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))..... ▶	51860.00	51860.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	51860.00	51860.00

**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 .....	5646.10	5646.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5646.10	5646.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	20000.00
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)) ..	25646.10	25646.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25646.10	25646.10

**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) .....	51500.00	51500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	51500.00	51500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5646.10	5646.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5646.10	5646.10

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

Form/Schedule: F3XA

Transaction ID :

AMENDMENT TO CORRECT TYPE OF REPORT FROM YEAR-END TO MID-YEAR AND ADD ADDITIONAL ACCRUED EXPENSE FROM 4/30/2015

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 7 OF 17
	<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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. IKE LAWRENCE EPSTEIN</b>		Date of Receipt
Mailing Address 213 LUXAIRE COURT		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAS VEGAS	NV	89144
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : INCA316</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
ZUFFA, LLC dba ULTIMATE FIGHTING CHAMI	CHIEF OPERATING OFFICER	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>B. LORENZO J. FERTITTA</b>		Date of Receipt
Mailing Address P.O. BOX 379045		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAS VEGAS	NV	89137
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : INCA317</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
STATION CASINOS, INC.	CHAIRMAN AND CEO	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

Full Name (Last, First, Middle Initial) <b>C. JOHN MULKEY</b>		Date of Receipt
Mailing Address 8913 PLAYERS CLUB DRIVE		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City	State	Zip Code
LAS VEGAS	NV	89134
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : INCA315</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
ZUFFA, LLC dba ULTIMATE FIGHTING CHAMI	CHIEF FINANCIAL OFFICER	<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 17
<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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

**A. DANA F. WHITE II**  
Full Name (Last, First, Middle Initial)

Mailing Address 10801 W. CHARLESTON BLVD., SUITE 6

City LAS VEGAS	State NV	Zip Code 89135
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FEC ID number of contributing federal political committee. **C**

Name of Employer ZUFFA, LLC dba ULTIMATE FIGHTING CHAM	Occupation PRESIDENT
---	-------------------------

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
03	/	27	/	2015

**Transaction ID : INCA314**

Amount of Each Receipt this Period  
5000.00

**B. KIRK D. HENDRICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 2557 RED ARROW DR.

City LAS VEGAS	State NV	Zip Code 89135
-------------------	-------------	-------------------

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

Name of Employer ZUFFA, LLC dba ULTIMATE FIGHTING CHAMP	Occupation CHIEF LEGAL OFFICER
--	-----------------------------------

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
03	/	31	/	2015

**Transaction ID : INCA318**

Amount of Each Receipt this Period  
5000.00

**C. TERESA FERTITTA**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O BOX 379045

City Las Vegas	State NV	Zip Code 89137
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation HOMEMAKER
-------------------------	-------------------------

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
04	/	09	/	2015

**Transaction ID : INCA320**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> 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 17
	(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"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ZUFFA POLITICAL ACTION COMMITTEE**

**A. MICHAEL L. BRITT**  
Full Name (Last, First, Middle Initial)

Mailing Address 1204 MOSELLE CT

City	State	Zip Code
Las Vegas	NV	89144-1115

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAM	VP, Business Development & Government

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  
 05 / 19 / 2015

**Transaction ID : INCA330**

Amount of Each Receipt this Period  
500.00

**B. EDWARD L. MUNCEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1120 GOLDEN AGE COURT

City	State	Zip Code
LAS VEGAS	NV	89144

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAMP	VICE PRESIDENT NEW MEDIA & TECHNOLC

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  
 05 / 19 / 2015

**Transaction ID : INCA327**

Amount of Each Receipt this Period  
5000.00

**C. MARC RATNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 10827 ACKERS DRIVE

City	State	Zip Code
HENDERSON	NV	89052

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAM	VICE PRESIDENT OF GOVERNMENT AND R

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  
 05 / 19 / 2015

**Transaction ID : INCA328**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> 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 17
	<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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

**A. JOSEPH SILVA**  
Full Name (Last, First, Middle Initial)

Mailing Address 9935 WESTHAMPTON GLEN PL

City	State	Zip Code
HENRICO	VA	23238

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAM	VICE PRESIDENT OF TALENT RELATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	19	/	2015

**Transaction ID : INCA329**

Amount of Each Receipt this Period  
3000.00

**B. CRAIG BORSARI**  
Full Name (Last, First, Middle Initial)

Mailing Address 7752 ROARING SPRINGS CIRCLE

City	State	Zip Code
LAS VEGAS	NV	89113

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAMP	EXECUTIVE VICE PRESIDENT OF OPERATI

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
05	/	27	/	2015

**Transaction ID : INCA332**

Amount of Each Receipt this Period  
5000.00

**C. PETER DROPICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 62 E SERENE AVE NO. 336

City	State	Zip Code
LAS VEGAS	NV	89123

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

Name of Employer	Occupation
ZUFFA, LLC dba ULTIMATE FIGHTING CHAM	VICE PRESIDENT OF EVENT OPERATIONS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : INCA335**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> 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 17  
(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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

**A. MICHAEL MOSSHOLDER**  
Full Name (Last, First, Middle Initial)

Mailing Address 54 MEADOWHAWK LANE

City LAS VEGAS State NV Zip Code 89135

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

Name of Employer ZUFFA, LLC dba ULTIMATE FIGHTING CHAM Occupation VICE PRESIDENT OF MARKETING PARTNEI

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : INCA336**

Amount of Each Receipt this Period  
5000.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	51500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 17  
(check only one)

<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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

**A. CANTOR FOR CONGRESS**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 17813

City RICHMOND	State VA	Zip Code 23226
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00355461

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 09 / 2015

**Transaction ID : INCA333**

Amount of Each Receipt this Period  
360.00

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	360.00
<b>TOTAL</b> This Period (last page this line number only).....▶	360.00

**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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
LEGAL SERVICES AND PAC ADMINISTRATION

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	1		1	4		2	0	1	5

**Transaction ID : EXPB301**

Amount of Each Disbursement this Period

8	8	2	.	2	5
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
LEGAL SERVICES AND PAC ADMINISTRATION

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	3		0	2		2	0	1	5

**Transaction ID : EXPB306**

Amount of Each Disbursement this Period

5	8	3	.	5	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Mailing Address 1415 L STREET, SUITE 1200

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
LEGAL SERVICES AND PAC ADMINISTRATION

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	3		0	2		2	0	1	5

**Transaction ID : EXPB304**

Amount of Each Disbursement this Period

1	0	4	.	4	5
---	---	---	---	---	---

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

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

2	5	1	.	0	0	2	5
---	---	---	---	---	---	---	---

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**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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ZUFFA, LLC**

Mailing Address 2960 WEST SAHARA AVENUE

City LAS VEGAS State NV Zip Code 89102

Purpose of Disbursement  
PAC ADMINISTRATION

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : EXPB313

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
LEGAL SERVICES AND PAC ADMINISTRATION

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : EXPB323

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. NIELSEN MERKSAMER PARRINELLO GROSS & LEONI LLP**

Mailing Address 1415 L STREET, SUITE 1200

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
LEGAL SERVICES AND PAC ADMINISTRATION

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

Transaction ID : EXPB325

Amount of Each Disbursement this Period

**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 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

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)  
**ZUFFA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HELLERHIGHWATER PAC**

Mailing Address P.O. BOX 370672

City LAS VEGAS State NV Zip Code 89137

Purpose of Disbursement

011

Candidate Name  
**LEADERSHIP PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2015

Transaction ID : EXPB312

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. BOEHNER FOR SPEAKER**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

011

Candidate Name  
**JOINT FUNDRAISING COMMITTEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2015

Transaction ID : EXPB322

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Mailing Address 425 2ND STREET NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

011

Candidate Name  
**POLITICAL PARTY**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 22 / 2015

Transaction ID : EXPB331

Amount of Each Disbursement this Period

10000.00

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

20000.00

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

20000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**ZUFFA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NIELSEN MERKSAMER PARRINELLO GROSS &amp; LEONI LLP</b>	Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200	
City State Zip Code SACRAMENTO CA 95814	

Outstanding Balance Beginning This Period 882.25	<b>Transaction ID : PAYD288</b>	
Amount Incurred This Period 0.00	Payment This Period 882.25	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NIELSEN MERKSAMER PARRINELLO GROSS &amp; LEONI LLP</b>	Nature of Debt (Purpose): LEGAL SERVICES AND PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200	
City State Zip Code SACRAMENTO CA 95814	

Outstanding Balance Beginning This Period 583.50	<b>Transaction ID : PAYD300</b>	
Amount Incurred This Period 0.00	Payment This Period 583.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NIELSEN MERKSAMER PARRINELLO GROSS &amp; LEONI LLP</b>	Nature of Debt (Purpose): LEGAL SERVICES & PAC ADMINISTRATION
Mailing Address 1415 L STREET, SUITE 1200	
City State Zip Code SACRAMENTO CA 95814	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD334</b>	
Amount Incurred This Period 621.50	Payment This Period 0.00	Outstanding Balance at Close of This Period 621.50

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	621.50
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> 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 17 OF 17
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**ZUFFA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NIELSEN MERKSAMER PARRINELLO GROSS &amp; LEONI LLP</b>	Nature of Debt (Purpose): <b>LEGAL SERVICES &amp; PAC ADMINISTRATION</b>
Mailing Address 1415 L STREET, SUITE 1200	
City State Zip Code <b>SACRAMENTO CA 95814</b>	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : PAYD342</b>	
Amount Incurred This Period <input type="text" value="765.48"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="765.48"/>

B. 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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="765.48"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="1386.98"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1386.98"/>