

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

AMERICA ASCENDANT 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="2016"/>	<input type="text" value="178500.00"/>	<input type="text" value="178500.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="178500.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="276000.00"/>	<input type="text" value="276000.00"/>
(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="454500.00"/>	<input type="text" value="454500.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="316803.24"/>	<input type="text" value="316803.24"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="137696.76"/>	<input type="text" value="137696.76"/>
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

AMERICA ASCENDANT PAC

Report Covering the Period: From: 01 / 01 / 2016 To: 03 / 31 / 2016

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).....	276000.00	276000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	276000.00	276000.00
(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)	276000.00	276000.00
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.....	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))..... ▶	276000.00	276000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	276000.00	276000.00

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	136709.33	136709.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	136709.33	136709.33
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)	180093.91	180093.91
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)) ..	316803.24	316803.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	316803.24	316803.24

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)	276000.00	276000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	276000.00	276000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	136709.33	136709.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	136709.33	136709.33

**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 15
<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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial) A. Ronald M Cameron		Date of Receipt MM / DD / YYYY 01 / 08 / 2016 Transaction ID : SA11AI.4108
Mailing Address PO Box 21440		Amount of Each Receipt this Period 250000.00
City Little Rock	State AR	Zip Code 72221
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Mountaire Corporation	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250000.00	

Full Name (Last, First, Middle Initial) B. Christopher A. Greer D.O.		Date of Receipt MM / DD / YYYY 02 / 11 / 2016 Transaction ID : SA11AI.4116
Mailing Address 7 Windhaven Dr		Amount of Each Receipt this Period 1000.00
City Fort Smith	State AR	Zip Code 72903
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Cooper Clinic	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Amb Howard H. Leach		Date of Receipt MM / DD / YYYY 03 / 10 / 2016 Transaction ID : SA11AI.4170
Mailing Address 3500 Royal Plam Way Ste 401		Amount of Each Receipt this Period 25000.00
City Palm Beach	State FL	Zip Code 33480
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer Self	Occupation Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	276000.00
TOTAL This Period (last page this line number only).....▶	276000.00

**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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. America Rising LLC

Mailing Address 1555 Wilson Blvd
Ste 307

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Consultant Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2016

Transaction ID : **SB21B.4119**

Amount of Each Disbursement this Period

1086.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Annamarie Atwood

Mailing Address 1904 N Bluebird Ln

City Altus State OK Zip Code 73521

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2016

Transaction ID : **SB21B.4115**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Annamarie Atwood

Mailing Address 1904 N Bluebird Ln

City Altus State OK Zip Code 73521

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : **SB21B.4128**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

11086.95

**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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. Annamarie Atwood

Mailing Address 1904 N Bluebird Ln

City Altus State OK Zip Code 73521

Purpose of Disbursement
Reimbursement (See Below)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : SB21B.4129

Amount of Each Disbursement this Period

924.88

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker Dr

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2016

Transaction ID : SB21B.4129.1

Amount of Each Disbursement this Period

386.20

Memo Item

Full Name (Last, First, Middle Initial)

C. The Wit Hotel

Mailing Address 201 N State St

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Travel Meal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2016

Transaction ID : SB21B.4129.5

Amount of Each Disbursement this Period

24.26

Memo Item

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

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

924.88

**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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)
A. Annamarie Atwood

Date of Disbursement: MM / DD / YYYY
02 / 22 / 2016

Mailing Address 1904 N Bluebird Ln

City Altus State OK Zip Code 73521

Purpose of Disbursement: Mileage Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.4129.8**

Amount of Each Disbursement this Period: 243.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY
02 / 08 / 2016

Mailing Address 3300 Bee Caves Rd #650-1151

City Austin State TX Zip Code 78746

Purpose of Disbursement: Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.4111**

Amount of Each Disbursement this Period: 32500.00

Memo Item

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

Date of Disbursement: MM / DD / YYYY
03 / 14 / 2016

Mailing Address 3300 Bee Caves Rd #650-1151

City Austin State TX Zip Code 78746

Purpose of Disbursement: Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.4169**

Amount of Each Disbursement this Period: 3750.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 36250.00

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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. Collins Anderson Philp Public Affairs LLC

Mailing Address 1800 M St NW
Ste 500 S

City Washington State DC Zip Code 20036

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4118

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Collins Anderson Philp Public Affairs LLC

Mailing Address 1800 M St NW
Ste 500 S

City Washington State DC Zip Code 20036

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4195

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Election CFO LLC

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4113

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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. Election CFO LLC

Mailing Address PO Box 26141

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2016

Transaction ID : **SB21B.4173**

Amount of Each Disbursement this Period

487.50

Memo Item

Full Name (Last, First, Middle Initial)

B. OnMessage Inc

Mailing Address 817 Slaters Ln

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Pre-Paid Advertising, Prodcution (See Debits for IE Spending)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2016

Transaction ID : **SB21B.4160**

Amount of Each Disbursement this Period

117573.91

Memo Item

Full Name (Last, First, Middle Initial)

C. OnMessage Inc

Mailing Address 817 Slaters Ln

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Debit Pre-Paid Advertising for IE, See Sch. E, Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.4165**

Amount of Each Disbursement this Period

-15288.00

Memo Item

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

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

102773.41

**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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. OnMessage Inc

Mailing Address 817 Slaters Ln

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Debit Pre-Paid Advertising for IE, See Sch. E, Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2016

Transaction ID : SB21B.4188

Amount of Each Disbursement this Period

-12520.00

Memo Item

Full Name (Last, First, Middle Initial)

B. OnMessage Inc

Mailing Address 817 Slaters Ln

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Debit Pre-Paid Advertising for IE, See Sch. E, Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 22 / 2016

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

-102285.91

Memo Item

Full Name (Last, First, Middle Initial)

C. Sagely Solutions, LLC

Mailing Address 1160 First St NE Ste 812

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 18 / 2016

Transaction ID : SB21B.4120

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

-112305.91

**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)
AMERICA ASCENDANT PAC

Full Name (Last, First, Middle Initial)

A. Sagely Solutions, LLC

Mailing Address 1160 First St NE
Ste 812

City Washington State DC Zip Code 20002

Purpose of Disbursement
Fundraising Consulting

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 / 07 / 2016

Transaction ID : SB21B.4148

Amount of Each Disbursement this Period

2500.00

Memo Item

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

Memo Item

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

Memo Item

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

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

2500.00

124029.33

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA ASCENDANT PAC	FEC IDENTIFICATION NUMBER ▼ C C00592527
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee NexGen Marketing, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 22 / 2016
Mailing Address 301 4th Ave S Ste 5010	Amount 50000.00
City State Zip Code Minneapolis MN 55415	Transaction ID : SE.4174 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 02 / 25 / 2016
Purpose of Expenditure Advertising - Digital	Category/Type
Name of Federal Candidate JOHN BOOZMAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
50000.00	

Full Name of Payee OnMessage Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Mailing Address 817 Slaters Ln	Amount 15288.00
City State Zip Code Alexandria VA 22314	Transaction ID : SE.4166 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Purpose of Expenditure Advertising - TV	Category/Type
Name of Federal Candidate CONNER ELDRIDGE	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
65288.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	65288.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 07 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) AMERICA ASCENDANT PAC	FEC IDENTIFICATION NUMBER ▼ C C00592527
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee OnMessage Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 22 / 2016
Mailing Address 817 Slaters Ln	Amount 102810.91
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Advertising - TV	Category/Type
Name of Federal Candidate JOHN BOOZMAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
168098.91	

Full Name of Payee OnMessage Inc <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 22 / 2016
Mailing Address 817 Slaters Ln	Amount 11995.00
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Advertising - TV (Production and Distribution)	Category/Type
Name of Federal Candidate JOHN BOOZMAN	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
180093.91	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	114805.91
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	180093.91

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Chris Marston

Signature _____ [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 07 / 2016