

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 Defenders of Freedom and Security

ADDRESS (number and street) 2423 C Street #11 Sacramento CA 95816 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00536664 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 09/01/2016 through 09/30/2016

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

Signature of Treasurer Hornaday, Alexander, , , [Electronically Filed] Date 03/27/2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Defenders of Freedom and Security

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="5446.89"/>	<input type="text" value="5446.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="12480.43"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="14478.90"/>	<input type="text" value="105300.10"/>
(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="26959.33"/>	<input type="text" value="110746.99"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16349.30"/>	<input type="text" value="100136.96"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10610.03"/>	<input type="text" value="10610.03"/>
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

Defenders of Freedom and Security

Report Covering the Period: From: 09 / 01 / 2016 To: 09 / 30 / 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).....	5525.00	34750.00
(ii) Unitemized	8953.90	70550.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	14478.90	105300.10
(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)	14478.90	105300.10
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)).....▶	14478.90	105300.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	14478.90	105300.10

DETAILED SUMMARY PAGE

of Disbursements

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	13274.30	88421.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	13274.30	88421.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1750.00	3940.00
24. Independent Expenditures (use Schedule E)	0.00	6015.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	1325.00	1760.00
(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)).....	1325.00	1760.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	16349.30	100136.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16349.30	100136.96

DETAILED SUMMARY PAGE
of Disbursements

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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)	14478.90	105300.10
34. Total Contribution Refunds (from Line 28(d))	1325.00	1760.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13153.90	103540.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13274.30	88421.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13274.30	88421.96

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report amended following internal audit to correctly report merchant processing fees, an unitemized operating expenditure, and two unitemized contribution refunds.

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 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
Defenders of Freedom and Security

A. BLEDSON, NORMA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 E ROSELYN DR
 City MOORESVILLE State IN Zip Code 46158-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.545803
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. BLEDSON, NORMA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 E ROSELYN DR
 City MOORESVILLE State IN Zip Code 46158-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.545806
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. BLEDSON, NORMA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6189 E ROSELYN DR
 City MOORESVILLE State IN Zip Code 46158-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.545807
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
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 8 OF 25
	(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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BLEDSON, NORMA J, , ,

Mailing Address **6189 E ROSELYN DR**

City MOORESVILLE	State IN	Zip Code 46158-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.545809

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BLEDSON, NORMA J, , ,

Mailing Address **6189 E ROSELYN DR**

City MOORESVILLE	State IN	Zip Code 46158-
----------------------------	--------------------	---------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 24 / 2016

Transaction ID : SA11A.545811

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BLEDSON, NORMA J, , ,

Mailing Address **6189 E ROSELYN DR**

City MOORESVILLE	State IN	Zip Code 46158-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
09 / 25 / 2016

Transaction ID : SA11A.545817

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 25
	(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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. COCHRAN, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4436 TYNE BLVD
 City NASHVILLE State TN Zip Code 37215-4550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.545602
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

B. COCHRAN, ANITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4436 TYNE BLVD
 City NASHVILLE State TN Zip Code 37215-4550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.545740
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

C. COUSINS, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20071 EAGLE STONE DR
 City ESTERO State FL Zip Code 33928-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11A.545764
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 25
	(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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. CRANE, CLIFFORD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 BIRCH ST
 City NEWPORT BEACH State CA Zip Code 92660-2688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 27 / 2016
Transaction ID : SA11A.545842
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

B. DILL, JOYCE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3725 W CENTER ST
 City CINCINNATI State OH Zip Code 45227-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 12 / 2016
Transaction ID : SA11A.545659
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. ELLIOTT, DONALD G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 CASTLE GARDENS DR
 City CASTLE HILLS State TX Zip Code 78213-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 04 / 2016
Transaction ID : SA11A.545599
 Amount of Each Receipt this Period 100.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD G, , ,

Mailing Address 101 CASTLE GARDENS DR

City CASTLE HILLS State TX Zip Code 78213-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

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
 09 / 09 / 2016

Transaction ID : SA11A.545642

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ELLIOTT, DONALD G, , ,

Mailing Address 101 CASTLE GARDENS DR

City CASTLE HILLS State TX Zip Code 78213-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

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
 09 / 17 / 2016

Transaction ID : SA11A.545721

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KOTHARI, SRIPRAKASH, , ,

Mailing Address 11 WALNUT ST

City LEXINGTON State MA Zip Code 02421-8219

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

Name of Employer (for Individual) MIT Occupation (for Individual) PROFESSOR

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2016

Transaction ID : SA11A.545605

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1200.00

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 12 OF 25
	<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	

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. LEHMAN, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 554 PINE ST
 City MEADVILLE State PA Zip Code 16335-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) USAF Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 22 / 2016
Transaction ID : SA11A.545783
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. LOUDEN, G. MALCOLM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address SUITE 1007 500 WEST 7TH STREET
 City FORT WORTH State TX Zip Code 76102-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WALSH HOLDINGS, LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 19 / 2016
Transaction ID : SA11A.545732
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. MUELLER, CARROLL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 MASON AVE
 City LAS VEGAS State NV Zip Code 89102-1920
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 24 / 2016
Transaction ID : SA11A.545814
 Amount of Each Receipt this Period 50.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
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 13 OF 25
(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)
Defenders of Freedom and Security

A. POGODZINSKI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9609 MANITOU PK DR

City MINOCQUA	State WI	Zip Code 54548-9362
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2016

Transaction ID : SA11A.545671

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

B. POGODZINSKI, ANTHONY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9609 MANITOU PK DR

City MINOCQUA	State WI	Zip Code 54548-9362
------------------	-------------	------------------------

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

Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS	Occupation (for Individual) INFORMATION REQUESTED PER BE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Transaction ID : SA11A.545735

Amount of Each Receipt this Period
100.00

Memo Item
CONTRIBUTION

C. RIGGINS, KARIN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8425 DOVER WAY

City ARVADA	State CO	Zip Code 80005-
----------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

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
09		10		2016

Transaction ID : SA11A.545653

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 14 OF 25
	<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	

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. SANDERS, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21543 ELM HURST
 City KATY State TX Zip Code 77450-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNEMPLOYED Occupation (for Individual) MECHANICAL ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 05 / 2016
Transaction ID : SA11A.545616
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. SANDERS, SUNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10387 YATES CT
 City WESTMINSTER State CO Zip Code 80031-2343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.545706
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

C. SANDERS, SUNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10387 YATES CT
 City WESTMINSTER State CO Zip Code 80031-2343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 15 / 2016
Transaction ID : SA11A.545707
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550.00
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 15 OF 25
	<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	

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. SANDERS, SUNNY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10387 YATES CT
 City WESTMINSTER State CO Zip Code 80031-2343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 30 / 2016
Transaction ID : SA11A.545853
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

B. SHIRLEY, MIL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 HILLVIEW DR APT 102
 City PENSACOLA State FL Zip Code 32514-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 13 / 2016
Transaction ID : SA11A.545678
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SWEATT, NANCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3087
 City SANTA CRUZ State CA Zip Code 95063-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2016
Transaction ID : SA11A.545753
 Amount of Each Receipt this Period 25.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1050.00
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 16 OF 25
	<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	

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2016

Transaction ID : SA11A.545758

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

B. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Transaction ID : SA11A.545772

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

C. SWEATT, NANCY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3087

City SANTA CRUZ	State CA	Zip Code 95063-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2016

Transaction ID : SA11A.545802

Amount of Each Receipt this Period
25.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	75.00
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 17 OF 25
	(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"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. TIMKEN, JOY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 MARKET AVE N
SUITE 210

City CANTON State OH Zip Code 44702-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2016

Transaction ID : SA11A.545823

Amount of Each Receipt this Period
250.00

Memo Item CONTRIBUTION

B. WIGNALL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS State CO Zip Code 80919-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.545747

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. WIGNALL, ROBERT, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS State CO Zip Code 80919-

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2016

Transaction ID : SA11A.545748

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	450.00
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 18 OF 25
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Defenders of Freedom and Security

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WIGNALL, ROBERT, , ,

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS	State CO	Zip Code 80919-
--------------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : SA11A.545749

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WIGNALL, ROBERT, , ,

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS	State CO	Zip Code 80919-
--------------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2016

Transaction ID : SA11A.545750

Amount of Each Receipt this Period
100.00

Memo Item CONTRIBUTION

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	5525.00

**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"/> 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)
Defenders of Freedom and Security

A. WATTERS, KEVIN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement
PAC SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 10 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I9719**

Amount of Each Disbursement this Period: 50.00

Memo Item

B. AMAGI STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 424 EAST 10TH ST #4C

City NEW YORK State NY Zip Code 10009-4288

Purpose of Disbursement
LIST RENTAL FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 26 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I9308**

Amount of Each Disbursement this Period: 2355.00

Memo Item

C. MOUNDSPRINGS STRATEGIES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 2423 C STREET #11

City SACRAMENTO State CA Zip Code 95816

Purpose of Disbursement
VIDEO EDITING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.I9308**

Amount of Each Disbursement this Period: 10413.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12818.00

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"/> 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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial)

A. PAYPAL

Mailing Address 2211 NORTH FIRST STREET

City SAN JOSE State CA Zip Code 95131

Purpose of Disbursement
PAYMENT PROCESSING FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
09 / 30 / 2016

FEC Identification Number

C
Transaction ID : SB21B.I9308
Amount of Each Disbursement this Period
456.30

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
MM / DD / YYYY

FEC Identification Number

C
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
MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

456.30
13274.30

**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"/> 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)
Defenders of Freedom and Security

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOE HECK		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address P.O. BOX 735908		FEC Identification Number C 00580688 Transaction ID : SB23.I93098
City LAS VEGAS	State NV	Zip Code 89136
Purpose of Disbursement GENERAL ELECTION CONTRIBUTION		Amount of Each Disbursement this Period 250.00
Candidate Name HECK, JOE, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District:	

Full Name (Last, First, Middle Initial) B. MARCO RUBIO FOR SENATE 2016		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address P.O. BOX 661537		FEC Identification Number C 00620518 Transaction ID : SB23.I93095
City MIAMI	State FL	Zip Code 33266
Purpose of Disbursement GENERAL ELECTION CONTRIBUTION		Amount of Each Disbursement this Period 250.00
Candidate Name RUBIO, MARCO, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District:	

Full Name (Last, First, Middle Initial) C. CHENEY FOR WYOMING		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016
Mailing Address P.O. BOX 697		FEC Identification Number C Transaction ID : SB23.I93094
City CASPER	State WY	Zip Code 82602
Purpose of Disbursement GENERAL ELECTION CONTRIBUTION		Amount of Each Disbursement this Period 250.00
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
Defenders of Freedom and Security

A. FRIENDS OF KELLY AYOTTE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 937

City
MANCHESTER

State
NH

Zip Code
03105

Purpose of Disbursement
GENERAL ELECTION CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB23.I93093
Amount of Each Disbursement this Period
250.00

Memo Item

B. FRIENDS OF MIA LOVE

Full Name (Last, First, Middle Initial)

Mailing Address 5251 S. GREEN ST
SUITE 100

City
MURRAY

State
UT

Zip Code
84123

Purpose of Disbursement
GENERAL ELECTION CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB23.I93096
Amount of Each Disbursement this Period
250.00

Memo Item

C. FRIENDS OF COL. ROB MANESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 53

City
MADISONVILLE

State
LA

Zip Code
70447

Purpose of Disbursement
GENERAL ELECTION CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2016

FEC Identification Number

C
Transaction ID : SB23.I93097
Amount of Each Disbursement this Period
250.00

Memo Item

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

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

750.00

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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
Defenders of Freedom and Security

A. MIL, SHIRLEY, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 10100 HILLVIEW DR.
APT 102

City PENSACOLA State FL Zip Code 32514

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 27 / 2016

FEC Identification Number: C
Transaction ID : SB28A.I9308
Amount of Each Disbursement this Period: 925.00

Memo Item

B. ROBERT, WIGNALL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS State CO Zip Code 80919

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C
Transaction ID : SB28A.I9308
Amount of Each Disbursement this Period: 100.00

Memo Item

C. ROBERT, WIGNALL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS State CO Zip Code 80919

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C
Transaction ID : SB28A.I9309
Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1125.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)
Defenders of Freedom and Security

A. Full Name (Last, First, Middle Initial)
ROBERT, WIGNALL, , ,

Mailing Address 5896 VIA VERONA VW

City COLORADO SPRINGS State CO Zip Code 80919

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY
09 / 20 / 2016

FEC Identification Number: C

Transaction ID : SB28A.I9309

Amount of Each Disbursement this Period: 100.00

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	1225.00