

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.
Ann PAC

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Signature of Treasurer [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Ann 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="2014"/>		76446.94
(b) Cash on Hand at Beginning of Reporting Period.....	57807.55	
(c) Total Receipts (from Line 19)	20500.00	89100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	78307.55	165546.94
7. Total Disbursements (from Line 31).....	27561.77	114801.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	50745.78	50745.78
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

Ann PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5500.00	40500.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5500.00	40600.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	15000.00	48500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	20500.00	89100.00
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))..... ▶	20500.00	89100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20500.00	89100.00

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	15061.77	43801.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15061.77	43801.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12500.00	66000.00
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	5000.00
(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	5000.00
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)) ..	27561.77	114801.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27561.77	114801.16

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)	20500.00	89100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20500.00	84100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15061.77	43801.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15061.77	43801.16

**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 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Ann PAC

A. Fredrick D Palmer
 Full Name (Last, First, Middle Initial)
 Mailing Address 57 Fair Oaks Drive
 City Saint Louis State MO Zip Code 63124-1521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Peabody Energy Occupation Vice President
 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
 07 / 01 / 2014
Transaction ID : A42B3B0749AD14EBF83E
 Amount of Each Receipt this Period
 5000.00

B. Stephen B Clark
 Full Name (Last, First, Middle Initial)
 Mailing Address 9273 Lerwick Dr
 City Dublin State OH Zip Code 43017-9492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Clark & Associates Occupation President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 10 / 2014
Transaction ID : AED1C69B8F9544594993
 Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	5500.00

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 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ann PAC

A. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 20 F Street NW
Suite 610

City Washington State DC Zip Code 20001-6700

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 01 / 2014
Transaction ID : A3CF9D9541D114DE8BE6

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Property Casualty Insurers Association of America

Mailing Address 8700 West Bryn Mawr Avenue
Suite 1200S

City Chicago State IL Zip Code 60631-3512

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 11 / 2014
Transaction ID : A0F778C0EA3B04ABF854

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMEREN FED PAC

Mailing Address 1331 Pennsylvania Ave, NW
Suite 550S

City Washington State DC Zip Code 20004-1710

FEC ID number of contributing federal political committee. **C** C00206136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
07 / 21 / 2014
Transaction ID : A2136F42FBA264DC481C

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial) A. PricewaterhouseCoopers PAC		Date of Receipt
Mailing Address 1301 K Street NW Suite 800 West		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20005-3317
FEC ID number of contributing federal political committee. C C00107235		Transaction ID : A8DF27C18395D40C3BFF
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name (Last, First, Middle Initial) B. The Home Depot Inc. PAC		Date of Receipt
Mailing Address 1155 F Street NW Suite 400		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20004-1346
FEC ID number of contributing federal political committee. C C00284885		Transaction ID : AAA5A8860F63C46EEAF3
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="1500.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>		

Full Name (Last, First, Middle Initial) c. Oppenheimer Funds PAC		Date of Receipt
Mailing Address Two World Financial Center		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City New York	State NY	Zip Code 10281-1001
FEC ID number of contributing federal political committee. C C00367920		Transaction ID : A1BA5EF3C9DCF4831937
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="3000.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="3000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="9500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 21
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Ann PAC

A. BNSF RailPAC
Full Name (Last, First, Middle Initial)
Mailing Address 500 New Jersey Avenue, NW
Suite 550
City Washington State DC Zip Code 20001-2069
FEC ID number of contributing federal political committee. **C** C00235739
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 25 / 2014
Transaction ID : AE328BA5373144FFD922
Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	15000.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Aristotle International, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Database Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2014

Transaction ID : BE7B7CE9230764A4FB01

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Commerce Bank

Mailing Address PO Box 808009

City Kansas City State MO Zip Code 64180-8009

Purpose of Disbursement
Credit Card Payment: 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
07 / 01 / 2014

Transaction ID : BB8CCE22D9B04446297B

Amount of Each Disbursement this Period

8156.77

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Bag Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : B5228378C50924538ABC

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Bag Fee

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

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

8456.77

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)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
Bag Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : B6148E7A1A6D84EBDA70

Amount of Each Disbursement this Period

15.00

[MEMO ITEM]
Bag Fee

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : B1D14F576D12942759F3

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

C. Chop House Charleston

Mailing Address 434 King St

City Charleston State SC Zip Code 29403-6230

Purpose of Disbursement
Political Meal

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : B43D318E34D7C427D925

Amount of Each Disbursement this Period

212.43

[MEMO ITEM]
Political Meal

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
airline fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : **BB6768D8C4BBF40098A6**

Amount of Each Disbursement this Period

2.00

[MEMO ITEM]
airline fee

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2014

Transaction ID : **BCEB195E9EBD74CAEBB1**

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

C. Enterprise Rent-a-Car, Pittsburgh

Mailing Address 2590 Library Rd

City Pittsburgh State PA Zip Code 15234-3105

Purpose of Disbursement
rental car - travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : **B10C597089C1B415594F**

Amount of Each Disbursement this Period

638.77

[MEMO ITEM]
rental car - travel expenses

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : BAE097F46F76A467F969

Amount of Each Disbursement this Period

814.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354-1989

Purpose of Disbursement
airline fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : BA53161E555E4410A818

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]
airline fee

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2014

Transaction ID : BBAEF4C1DC36942DCB61

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]
airline travel expenses

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Acqua AI 2

Mailing Address 212 7th St SE

City Washington State DC Zip Code 20003-4311

Purpose of Disbursement
Event Expenses: Food & Beverage

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 22 / 2014

Transaction ID : **BD3DFFE34E4914EB0B75**

Amount of Each Disbursement this Period

2525.95

[MEMO ITEM]

Event Expenses: Food & Beverage

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 7001 Tower Road

City Denver State CO Zip Code 80249-7312

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : **B6C48315129674E67962**

Amount of Each Disbursement this Period

524.00

[MEMO ITEM]

airline travel expenses

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address 7001 Tower Road

City Denver State CO Zip Code 80249-7312

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 30 / 2014

Transaction ID : **B5E2B985350814747B78**

Amount of Each Disbursement this Period

524.00

[MEMO ITEM]

airline travel expenses

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address 4000 E. Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034-3802

Purpose of Disbursement
flight fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 04 / 2014

Transaction ID : B160E1BCAB3914D8E869

Amount of Each Disbursement this Period

5.00

[MEMO ITEM]
flight fee

Full Name (Last, First, Middle Initial)

B. Hilton Hotels, Santa Ana, Ca

Mailing Address 201 E MacArthur Blvd

City Santa Ana State CA Zip Code 92707-5776

Purpose of Disbursement
hotel stay/travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : B2C7D38B9F3DF42C6B76

Amount of Each Disbursement this Period

246.98

[MEMO ITEM]
hotel stay/travel expenses

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : B802669A6075B4B2FB4A

Amount of Each Disbursement this Period

271.00

[MEMO ITEM]
airline travel expenses

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : **BBF6E0BDF171A411F860**

Amount of Each Disbursement this Period

426.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235-1908

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : **B143B9EC91A054104A08**

Amount of Each Disbursement this Period

271.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

C. Enterprise rent-a-car, Santa Barbara, CA

Mailing Address 500 Fowler RD

City Santa Barbara State CA Zip Code 93117-3900

Purpose of Disbursement
car rental

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2014

Transaction ID : **B4B5FC9DC2CC942ECB42**

Amount of Each Disbursement this Period

583.82

[MEMO ITEM]
car rental

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2014

Transaction ID : BE0CDA41DFDDF4BD09E2

Amount of Each Disbursement this Period

404.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
airline travel expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2014

Transaction ID : BB2B221E6808341DEB66

Amount of Each Disbursement this Period

404.00

[MEMO ITEM]
airline travel expenses

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Boulevar

City Fort Worth State TX Zip Code 76155-2605

Purpose of Disbursement
airline fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2014

Transaction ID : B1F6F679BE2174560A76

Amount of Each Disbursement this Period

12.49

[MEMO ITEM]
airline fee

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

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

0.00

**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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Capital Enhancement, Inc.

Mailing Address 150 Long Rd
Ste 50

City Chesterfield State MO Zip Code 63005-1239

Purpose of Disbursement
Administrative Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 02 / 2014

Transaction ID : B91687FE1E2F243EA8EF

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Capital Enhancement, Inc.

Mailing Address 150 Long Rd
Ste 50

City Chesterfield State MO Zip Code 63005-1239

Purpose of Disbursement
Fundraising Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : BF03CC91B7BE34197B00

Amount of Each Disbursement this Period

3005.00

Full Name (Last, First, Middle Initial)

C. Gula Graham Group

Mailing Address 499 S Capitol St SW
Ste 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement
Fundraising Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2014

Transaction ID : B43EA52AA70FF4F64894

Amount of Each Disbursement this Period

1100.00

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

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

4605.00

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

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Capital Enhancement, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2014

Mailing Address 150 Long Rd
Ste 50

City Chesterfield State MO Zip Code 63005-1239

Purpose of Disbursement
Fundraising Fee

Candidate Name

Category/
Type

Transaction ID : B92AA329060214541836

Amount of Each Disbursement this Period

2000.00

Office Sought: House
 Senate
 President
 State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
 State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
 State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

2000.00

15061.77

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. Cantor Young Guns Victory Fund

Mailing Address 25 E. Main Street

City Richmond State VA Zip Code 23219-2109

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State:

District:

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2014

Transaction ID : **BB044EA3B58134BED843**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Patrice Douglas for Congress

Mailing Address P.O. BOX 6271

City Edmond State OK Zip Code 73083-6271

Purpose of Disbursement
Political Contribution: Runoff

Candidate Name

Patrice Douglas

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼
Other2014

State: OK

District: 05

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : **B4DE4943F64984ADF819**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. CANTOR FOR CONGRESS

Mailing Address PO BOX 17813

City RICHMOND State VA Zip Code 23226-7813

Purpose of Disbursement
Political Contribution: Primary 2014

Candidate Name

Rep. Eric I. Cantor

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: VA

District: 07

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : **BC62BB285FC7D499BAFF**

Amount of Each Disbursement this Period

2500.00

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

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

9500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Ann PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JACK KINGSTON

Mailing Address PO BOX 2133

City SAVANNAH State GA Zip Code 31402

Purpose of Disbursement
Political Contribution: Primary 2014

Candidate Name
Rep. Jack H. Kingston Sr.

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: GA District: 01

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2014

Transaction ID : BFB98B82ACAE24CCDB52

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.

Mailing Address P.O. BOX 11091

City CHATTANOOGA State TN Zip Code 37401

Purpose of Disbursement
Political Contribution: Primary 2014

Candidate Name
Rep. Chuck J. Fleischmann

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: TN District: 03

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2014

Transaction ID : B833183C8E2FF4AA0810

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

3000.00

12500.00