

**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.

Project West Political Action Committee

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

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

Election on  in the State of

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

Election on  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 Lisker, Lisa, , ,

Signature of Treasurer Lisker, Lisa, , , [Electronically Filed] Date

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)

Write or Type Committee Name

**Project West Political Action Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		77404.84
(b) Cash on Hand at Beginning of Reporting Period.....	99622.10	
(c) Total Receipts (from Line 19) .....	30700.00	550559.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	130322.10	627964.23
7. Total Disbursements (from Line 31).....	39814.58	537456.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	90507.52	90507.52
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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. 05/2016)

Write or Type Committee Name

**Project West Political Action Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 29 / 2016 To: M M / D D / Y Y Y Y 12 / 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).....	4000.00	69202.12
(ii) Unitemized .....	200.00	300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4200.00	69502.12
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	26500.00	466000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	30700.00	535502.12
12. Transfers From Affiliated/Other Party Committees.....	0.00	13816.46
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	1240.81
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)).....▶	30700.00	550559.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	30700.00	550559.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

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 .....	39814.58	226378.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	39814.58	226378.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	258577.90
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
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 .....	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 (Including Non-Federal Donations).....	0.00	52500.00
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)) ..	39814.58	537456.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39814.58	537456.71

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	30700.00	535502.12
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30700.00	535502.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	39814.58	226378.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1240.81
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	39814.58	225138.00

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

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NAME OF COMMITTEE (In Full)  
**Project West Political Action Committee**

**A. Ak-Chin Indian Community**

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

Mailing Address 42507 West Peters & Nail Road

City Maricopa	State AZ	Zip Code 85138-3940
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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 ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 02 / 2016

**Transaction ID : A0D87C78D6C714B0AB6A**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Franasiak, David, , ,**

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

Mailing Address 873 Coachway

City Annapolis	State MD	Zip Code 21401-6481
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Williams & Jensen	Occupation (for Individual) Attorney
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2016

**Transaction ID : A3699BA4F3B8C4E1C87F**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Willcox, Lawrence, , ,**

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

Mailing Address 9325 Renshaw Drive

City Bethesda	State MD	Zip Code 20817-2227
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Capitol Tax Partners	Occupation (for Individual) Lawyer/Lobbyist
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 20 / 2016

**Transaction ID : AF7FCF3D1A5CE4D569A9**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Project West Political Action Committee**

**A. White, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 Primrose Street  
 City Chevy Chase State MD Zip Code 20815-3324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Roberti and White Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2016  
**Transaction ID : A09D529F66D244B62ADC**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Willcox, Darren, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10711 Falls Pointe Dr  
 City Great Falls State VA Zip Code 22066-1621  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) W Strategies Occupation (for Individual) Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2016  
**Transaction ID : A644118601F494EB9AE0**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**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 M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4000.00

**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 8 OF 17
<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)  
**Project West Political Action Committee**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE**

Mailing Address **PO BOX 12846**

City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78711</b>
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FEC ID number of contributing federal political committee. **C C00358903**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2000.00**

Date of Receipt  
**12 / 02 / 2016**

**Transaction ID : A6D280B0F48E740D4AAE**

Amount of Each Receipt this Period  
**2000.00**

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address **325 Seventh Street, NW  
Suite 700**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 16 / 2016**

**Transaction ID : A4A5590C0F6A14EB4999**

Amount of Each Receipt this Period  
**4000.00**

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**Blue Cross and Blue Shield Association PAC**

Mailing Address **1310 G Street NW**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005-3000</b>
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FEC ID number of contributing federal political committee. **C C00194746**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**4500.00**

Date of Receipt  
**12 / 20 / 2016**

**Transaction ID : A40274CF2F4E84A42983**

Amount of Each Receipt this Period  
**1000.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<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)  
**Project West Political Action Committee**

**A. FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120
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FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2016

**Transaction ID : A9EA6535D91664377BDA**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. National Restaurant Association PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1200 17th St, NW

City Washington	State DC	Zip Code 20036
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FEC ID number of contributing federal political committee. **C** C00003764

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2016

**Transaction ID : AC6577337728E41C396D**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. American Family Mutual Insurance Co. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 6000 American Parkway

City Madison	State WI	Zip Code 53783
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FEC ID number of contributing federal political committee. **C** C00354290

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2016

**Transaction ID : AC03AAF705710420FA79**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<input 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)  
**Project West Political Action Committee**

**A. AFLAC PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **WORLDWIDE HEADQUARTERS**  
**1932 WYNNNTON ROAD**

City <b>COLUMBUS</b>	State <b>GA</b>	Zip Code <b>31999</b>
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FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3500.00**

Date of Receipt  
**12 / 22 / 2016**

**Transaction ID : A836A26C99DC94760B46**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**B. American Council of Engineering Companies PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **1015 15th St NW Ste 802**

City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**12 / 22 / 2016**

**Transaction ID : AC313DB743E7D40AA9D2**

Amount of Each Receipt this Period  
**2500.00**

Memo Item

**C. NextEra Energy PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **700 Universe Blvd.**

City <b>Juno Beach</b>	State <b>FL</b>	Zip Code <b>33408</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00064774**

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**12 / 31 / 2016**

**Transaction ID : AD635C0E2CB674A08801**

Amount of Each Receipt this Period  
**1500.00**

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 17
<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)  
**Project West Political Action Committee**

**A. Independent Insurance Agents & Brokers of America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 412 First St, SE Suite 300

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00022343

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

**Transaction ID : A27B05497795A4B71AC7**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Clear Channel Communications, INC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 200 E. Basse Rd.

City San Antonio	State TX	Zip Code 78209
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00279216

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

**Transaction ID : A47E5D7DAB8914BBA995**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00105981

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

**Transaction ID : AD458DD8BA79446D18E8**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 17
<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)  
**Project West Political Action Committee**

**A. National Cattlemens Beef Association PAC**

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

Mailing Address 1301 Pennsylvania Ave NW Ste 300

City Washington	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00028787

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

**Transaction ID : A8E76E0D6351C482E92B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. MICRON TECHNOLOGY, INC. PAC**

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

Mailing Address 8000 S. FEDERAL WAY MS 1-407

City BOISE	State ID	Zip Code 83707
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00443671

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2016

**Transaction ID : A353F721516724C11BA6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**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 M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	26500.00

**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)

**Project West Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bradley Patrick Group LLC**

Mailing Address 1020 N Fairfax Street Ste 201

City  
Alexandria

State  
VA

Zip Code  
22314-1537

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B2D3BB6E89**

Amount of Each Disbursement this Period

[Redacted] 3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Starboard Group**

Mailing Address 7720 East Belleview Ave.  
Suite B-325

City  
Greenwood Village

State  
CO

Zip Code  
80111

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B82E90B138C**

Amount of Each Disbursement this Period

[Redacted] 6500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Starboard Group**

Mailing Address 7720 East Belleview Ave.  
Suite B-325

City  
Greenwood Village

State  
CO

Zip Code  
80111

Purpose of Disbursement  
Event Catering/Travel/Meals

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			06			2016			

FEC Identification Number

**C** [Redacted]

**Transaction ID : B3B97A6908**

Amount of Each Disbursement this Period

[Redacted] 15993.47

Memo Item

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

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

[Redacted] 25993.47

[Redacted]

**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)  
**Project West Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Anedot**

Mailing Address 214 3rd St  
Ste 2B

City Baton Rouge State LA Zip Code 70801-1315

Purpose of Disbursement  
CC Processing Fees

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  
12 / 08 / 2016

FEC Identification Number

C  
**Transaction ID : B8383A39EE**  
Amount of Each Disbursement this Period  
19.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. Siciliano, John, , ,**

Mailing Address 9227 E Lincoln Ave

City Lone Tree State CO Zip Code 80124-5506

Purpose of Disbursement  
Travel Reimbursement-See Memos

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  
12 / 05 / 2016

FEC Identification Number

C  
**Transaction ID : BF19BB7586**  
Amount of Each Disbursement this Period  
403.35

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hertz**

Mailing Address 225 Brae Blvd

City Park Ridge State NJ Zip Code 07656-1870

Purpose of Disbursement  
Rental Car

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  
12 / 05 / 2016

FEC Identification Number

C  
**Transaction ID : B67345BEAC**  
Amount of Each Disbursement this Period  
363.20  
Rental Car

Memo Item

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

423.15

**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)  
**Project West Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265-0448

Purpose of Disbursement  
Credit Card Payment--See Memos

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number

C  
Transaction ID : B1AC88A3E7  
Amount of Each Disbursement this Period  
12380.24

Memo Item

Full Name (Last, First, Middle Initial)

**B. Brown Palace Hotel**

Mailing Address 321 17th St

City Denver State CO Zip Code 80202-4003

Purpose of Disbursement  
Event Space Rental/Catering

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number

C  
Transaction ID : BA12525E364  
Amount of Each Disbursement this Period  
11744.85  
Event Space Rental/Catering

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 182 Howard Street

City San Francisco State CA Zip Code 94105-1611

Purpose of Disbursement  
Travel

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2016

FEC Identification Number

C  
Transaction ID : BABFEF8A8  
Amount of Each Disbursement this Period  
635.39  
Travel

Memo Item

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

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

12380.24

**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)  
**Project West Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Rogers, Natalie, , ,</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address 5305 Little Falls Rd		FEC Identification Number C [ ] <b>Transaction ID : B0C02F2C4B</b> Amount of Each Disbursement this Period [ ] 341.94	
City Arlington	State VA	Zip Code 22207-1521	Category/ Type [ ]
Purpose of Disbursement Travel Reimbursement-See Memos		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Hertz</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address 225 Brae Blvd		FEC Identification Number C [ ] <b>Transaction ID : B2537619535</b> Amount of Each Disbursement this Period [ ] 319.62 Rental Car	
City Park Ridge	State NJ	Zip Code 07656-1870	Category/ Type [ ]
Purpose of Disbursement Rental Car		Candidate Name	
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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Dobkin, Jerrod, , ,</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2016	
Mailing Address 770 5th St NW Apt 1018		FEC Identification Number C [ ] <b>Transaction ID : BEEF9629FE</b> Amount of Each Disbursement this Period [ ] 624.23	
City Washington	State DC	Zip Code 20001-2671	Category/ Type [ ]
Purpose of Disbursement Travel Reimbursement-See Memos		Candidate Name	
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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 966.17
<b>TOTAL</b> 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)  
**Project West Political Action Committee**

**A. Enterprise Rent a Car**

Full Name (Last, First, Middle Initial)

Mailing Address 2273 Research Boulevard  
Floor 7

City Rockville State MD Zip Code 20850-6248

Purpose of Disbursement Rental Car

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
12 / 05 / 2016

FEC Identification Number: C

Transaction ID : B94A0B9A6D

Amount of Each Disbursement this Period: 496.07

Rental Car

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) ▼

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) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** This Period (last page this line number only)..... ▶ 39763.03