

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Stand For Truth, Inc.

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="2065001.16"/>	<input type="text" value="2065001.16"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="292165.31"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2170135.51"/>	<input type="text" value="8563983.94"/>
(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="2462300.82"/>	<input type="text" value="10628985.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1920558.42"/>	<input type="text" value="10087242.70"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="541742.40"/>	<input type="text" value="541742.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Stand For Truth, Inc.

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).....	1936500.00	8330118.48
(ii) Unitemized	299.99	301.24
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1936799.99	8330419.72
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	150000.00	150000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2086799.99	8480419.72
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).....	83335.52	83522.19
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	42.03
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))..... ▶	2170135.51	8563983.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2170135.51	8563983.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	420078.42	663021.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	420078.42	663021.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	100000.00	100000.00
24. Independent Expenditures (use Schedule E)	1400480.00	9224221.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	100000.00
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)) ..	1920558.42	10087242.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1920558.42	10087242.70

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)	2086799.99	8480419.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2086799.99	8480419.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	420078.42	663021.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	83335.52	83522.19
38. Net Operating Expenditures (subtract Line 37 from Line 36)	336742.90	579499.51

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

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

FOR LINE NUMBER: PAGE 6 OF 23
(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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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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)
A. Mike Adams

Mailing Address 1288 Ballantrae Farm Drive

City McLean State VA Zip Code 22101

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
03 / 08 / 2016

Transaction ID : SA11AI.4570

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address 620 Newport Center Drive Suite 900

City Newport Beach State CA Zip Code 92660

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

Name of Employer Research Affiliates Occupation Investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
03 / 29 / 2016

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period
250000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. August A. Busch III

Mailing Address 1 Mid Rivers Mall Drive Suite 210

City St. Peters State MO Zip Code 63376

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
03 / 17 / 2016

Transaction ID : SA11AI.4566

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 360000.00

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 7 OF 23
	<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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial) A. Cody Campbell		Date of Receipt MM / DD / YYYY 03 / 21 / 2016 Transaction ID : SA11AI.4583
Mailing Address 1401 Ballinger Suite 200		Amount of Each Receipt this Period 100000.00
City Fort Worth	State TX	Zip Code 76102
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Double Eagle Development, LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) B. Children of Israel, LLC		Date of Receipt MM / DD / YYYY 03 / 18 / 2016 Transaction ID : SA11AI.4581
Mailing Address 18921 Loree Ave.		Amount of Each Receipt this Period 150000.00
City Cupertino	State CA	Zip Code 95014
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400000.00	

Full Name (Last, First, Middle Initial) C. Debusk Services Group, LLC		Date of Receipt MM / DD / YYYY 03 / 11 / 2016 Transaction ID : SA11AI.4579
Mailing Address 3214 Pasadena Freeway		Amount of Each Receipt this Period 25000.00
City Pasadena	State TX	Zip Code 77503
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....▶	275000.00
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 23
(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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)
A. Gallery Model Homes, Inc.

Mailing Address 6006 North Freeway

City Houston State TX Zip Code 77076

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
03 / 10 / 2016
Transaction ID : SA11AI.4574

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address 3310 W. Main Street

City Houston State TX Zip Code 77098

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
03 / 17 / 2016
Transaction ID : SA11AI.4586

Amount of Each Receipt this Period
25000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Ira M Nitzner 2004 Revocable Trust

Mailing Address 3120 Southwest Freeway Suite 200

City Houston State TX Zip Code 77098

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
03 / 15 / 2016
Transaction ID : SA11AI.4560

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150000.00

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 9 OF 23
	<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)
Stand For Truth, Inc.

A. Ben Klein
Full Name (Last, First, Middle Initial)
Mailing Address 7444 N. Long Ave.
City Skokie State IL Zip Code 60077
FEC ID number of contributing federal political committee. **C**
Name of Employer Platinum Health Care Occupation CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **1200000.00**

Date of Receipt **03 / 09 / 2016**
Transaction ID : SA11AI.4572
Amount of Each Receipt this Period **500000.00**
 Memo Item

B. Robert Marling
Full Name (Last, First, Middle Initial)
Mailing Address 30 S. Tranquil Path
City The Woodlands State TX Zip Code 77380
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **250000.00**

Date of Receipt **03 / 07 / 2016**
Transaction ID : SA11AI.4569
Amount of Each Receipt this Period **200000.00**
 Memo Item

C. Robert Marling
Full Name (Last, First, Middle Initial)
Mailing Address 30 S. Tranquil Path
City The Woodlands State TX Zip Code 77380
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date **450000.00**

Date of Receipt **03 / 09 / 2016**
Transaction ID : SA11AI.4573
Amount of Each Receipt this Period **200000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900000.00
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 10 OF 23
	<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)
Stand For Truth, Inc.

A. Michael Miller
Full Name (Last, First, Middle Initial)

Mailing Address 4402 Boxwood Road

City Bethesda State MD Zip Code 20816

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

Name of Employer Self-Employed Occupation Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2016
Transaction ID : SA11AI.4437

Amount of Each Receipt this Period 500.00

Memo Item

B. Lee Roy Mitchell
Full Name (Last, First, Middle Initial)

Mailing Address 12400 Coit Road Suite 800

City Dallas State TX Zip Code 75251

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

Name of Employer Copper Beach Capital Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550000.00

Date of Receipt 03 / 18 / 2016
Transaction ID : SA11AI.4582

Amount of Each Receipt this Period 100000.00

Memo Item

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

Mailing Address 1440 Jacks Canyon Road

City Sedona State AZ Zip Code 86351

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2016
Transaction ID : SA11AI.4439

Amount of Each Receipt this Period 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 101500.00

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 11 OF 23
	<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)
Stand For Truth, Inc.

A. Robert Shapiro
Full Name (Last, First, Middle Initial)

Mailing Address 14225 Ventura Boulevard
Suite 100

City Sherman Oaks State CA Zip Code 91423

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

Name of Employer Woodbridge Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
03 / 16 / 2016
Transaction ID : SA11AI.4445

Amount of Each Receipt this Period
20000.00

Memo Item

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

Mailing Address 9338 Meadowbrook Drive

City Dallas State TX Zip Code 75220

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

Name of Employer Grazers, Inc. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
03 / 02 / 2016
Transaction ID : SA11AI.4435

Amount of Each Receipt this Period
20000.00

Memo Item

C. Steven C Mitzner 2004 Trust
Full Name (Last, First, Middle Initial)

Mailing Address 3120 Southwest Freeway
Suite 200

City Houston State TX Zip Code 77098

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
03 / 07 / 2016
Transaction ID : SA11AI.4563

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 65000.00

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 12 OF 23
	(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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial) A. Texas TransEastern Inc.			Date of Receipt MM / DD / YYYY 03 / 04 / 2016 Transaction ID : SA11AI.4486
Mailing Address P.O. Box 5339			Amount of Each Receipt this Period 10000.00
City Pasadena	State TX	Zip Code 77508	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. United Automobile Insurance Co			Date of Receipt MM / DD / YYYY 03 / 08 / 2016 Transaction ID : SA11AI.4571
Mailing Address 1313 N.W. 167th Street			Amount of Each Receipt this Period 50000.00
City Miami Gardens	State FL	Zip Code 33169	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00		

Full Name (Last, First, Middle Initial) C. Richard W. Weekley			Date of Receipt MM / DD / YYYY 03 / 07 / 2016 Transaction ID : SA11AI.4564
Mailing Address 1111 N Post Oak Road			Amount of Each Receipt this Period 25000.00
City Houston	State TX	Zip Code 77055	<input type="checkbox"/> Memo Item
FEC ID number of contributing federal political committee. C			
Name of Employer Weekley Properties	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00		

SUBTOTAL of Receipts This Page (optional).....▶	85000.00
TOTAL This Period (last page this line number only).....▶	1936500.00

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 23	
(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)
Stand For Truth, Inc.

A. TRUSTED LEADERSHIP PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1101 WEST 34TH STREET
SUITE 461

City AUSTIN State TX Zip Code 78705

FEC ID number of contributing federal political committee. **C** C00609511

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2016

Transaction ID : SA11C.4578

Amount of Each Receipt this Period
150000.00

Memo Item

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150000.00
TOTAL This Period (last page this line number only).....▶	150000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 23
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)
A. ASE Group, Inc.

Mailing Address 6600 College Blvd
Suite 310

City Overland Park State KS Zip Code 66211

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2514.22

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2016
Transaction ID : SA15.4559

Amount of Each Receipt this Period
2514.22

Memo Item

Full Name (Last, First, Middle Initial)
B. SRCP Media, Inc.

Mailing Address 201 North Union Street
Suite 200

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
80821.30

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 02 / 2016
Transaction ID : SA15.4568

Amount of Each Receipt this Period
80821.30

Memo Item
Refund of unallocated media buys

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	83335.52
TOTAL This Period (last page this line number only).....▶	83335.52

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

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. Advantage, Inc.

Mailing Address 2300 Clarendon Boulevard
Suite 303

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

005
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4539

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Advantage, Inc.

Mailing Address 2300 Clarendon Boulevard
Suite 303

City Arlington State VA Zip Code 22201

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

005
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4546

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ASE Group, Inc.

Mailing Address 6600 College Blvd
Suite 310

City Overland Park State KS Zip Code 66211

Purpose of Disbursement
Consulting - event planning

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

007
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4553

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. Digital Freedom, LLC

Mailing Address PO Box 65448

City Washington State DC Zip Code 20035

Purpose of Disbursement
Consultant - internet consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4552

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dinsmore & Shohl LLP

Mailing Address 250 West Main Street
Suite 1400

City Lexington State KY Zip Code 40507

Purpose of Disbursement
Legal services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4538

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Dinsmore & Shohl LLP

Mailing Address 250 West Main Street
Suite 1400

City Lexington State KY Zip Code 40507

Purpose of Disbursement
Legal services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4550

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. Doner Fundraising, Inc.

Mailing Address 815 Brazos
Suite 701

City Austin State TX Zip Code 78701

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4548

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Norfleet Strategies, LLC

Mailing Address 807 Brazos Street
Suite 602

City Austin State TX Zip Code 78701

Purpose of Disbursement
Campaign consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4547

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. One Harbor, LLC

Mailing Address PO Box 22942

City Houston State TX Zip Code 77227

Purpose of Disbursement
General Campaign Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4558

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. One Harbor, LLC

Mailing Address PO Box 22942

City Houston State TX Zip Code 77227

Purpose of Disbursement
General / Campaign Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 25 / 2016

Transaction ID : SB21B.4554

Amount of Each Disbursement this Period

27545.91

Memo Item

Full Name (Last, First, Middle Initial)

B. Raise The Money

Mailing Address P.O. Box 26466

City Little Rock State AR Zip Code 72221

Purpose of Disbursement
Fundraising expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SB21B.4589

Amount of Each Disbursement this Period

3274.95

Memo Item

Full Name (Last, First, Middle Initial)

C. Stalwart Advisory LLC

Mailing Address 300 Throckmorton
Suite 1550

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Fundraising consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

003
Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 09 / 2016

Transaction ID : SB21B.4540

Amount of Each Disbursement this Period

45303.31

Memo Item

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

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

76124.17

**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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. Stalwart Advisory LLC

Mailing Address 300 Throckmorton
Suite 1550

City Fort Worth State TX Zip Code 76102

Purpose of Disbursement
Fundraising consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4545

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. The Lauderback Group

Mailing Address 1307 Elton Lane

City Austin State TX Zip Code 78703

Purpose of Disbursement
Fundraising consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4543

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. The Lauderback Group

Mailing Address 1307 Elton Lane

City Austin State TX Zip Code 78703

Purpose of Disbursement
Fundraising consulting

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4555

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Stand For Truth, Inc.

Full Name (Last, First, Middle Initial)

A. TRUSTED LEADERSHIP PAC

Mailing Address 1101 WEST 34TH STREET
SUITE 461

City AUSTIN State TX Zip Code 78705

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB23.4556

Amount of Each Disbursement this Period

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

/ /

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

/ /

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stand For Truth, Inc.
FEC IDENTIFICATION NUMBER C C00592337
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee SRCP Media, Inc.
Mailing Address 201 North Union Street Suite 200
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Advertising - TV Category/Type 004
Name of Federal Candidate DONALD J TRUMP
Office Sought: President State: LA
Disbursement For: Primary
Amount 250000.00
Transaction ID: SE.4408
Date of Disbursement or Obligation 03/02/2016

Full Name of Payee SRCP Media, Inc.
Mailing Address 201 North Union Street Suite 200
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Advertising - TV Category/Type 004
Name of Federal Candidate MARCO RUBIO
Office Sought: President State: FL
Disbursement For: Primary
Amount 450000.00
Transaction ID: SE.4411
Date of Disbursement or Obligation 03/09/2016

(a) SUBTOTAL of Itemized Independent Expenditures 700000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature D Eric Lycan [Electronically Filed] Date 04/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stand For Truth, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00592337
---	--

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee <input type="checkbox"/> Memo Item SRCP Media, Inc.	Date of Public Distribution/Dissemination <input type="text" value="MM / DD / YYYY"/> 03 / 10 / 2016
Mailing Address 201 North Union Street Suite 200	Amount <input type="text" value="200000.00"/>
City State Zip Code Alexandria VA 22314	Transaction ID : SE.4412 Date of Disbursement or Obligation <input type="text" value="MM / DD / YYYY"/> 03 / 09 / 2016
Purpose of Expenditure Advertising - TV -also opposes Rubio, Trump	Category/Type <input type="text" value="004"/>
Name of Federal Candidate Ted Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: NC
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="200000.00"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item SRCP Media, Inc.	Date of Public Distribution/Dissemination <input type="text" value="MM / DD / YYYY"/> 03 / 11 / 2016
Mailing Address 201 North Union Street Suite 200	Amount <input type="text" value="350360.00"/>
City State Zip Code Alexandria VA 22314	Transaction ID : SE.4415 Date of Disbursement or Obligation <input type="text" value="MM / DD / YYYY"/> 03 / 11 / 2016
Purpose of Expenditure Advertising - TV - also opposes Trump, Rubio	Category/Type <input type="text" value="004"/>
Name of Federal Candidate Ted Cruz	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President State: IL
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="350360.00"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text" value="550360.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text" value=""/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text" value=""/>

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

D Eric Lycan [Electronically Filed] Date
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stand For Truth, Inc.	FEC IDENTIFICATION NUMBER ▼ C C00592337
---	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee SRCP Media, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 201 North Union Street Suite 200	Amount 150120.00
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Advertising - TV - also opposes Trump, Rubio	Category/Type 004
Name of Federal Candidate Ted Cruz	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 350120.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought 	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	150120.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	1400480.00

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

D Eric Lycan [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____