

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
CHERPAC

ADDRESS (number and street) 1050 17th St NW Ste 590
Washington DC 20036
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00540906 3. IS THIS REPORT NEW (N) OR AMENDED (A) (X)

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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2016 through 07 / 31 / 2016

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 Jeanette Hunter

Signature of Treasurer Jeanette Hunter [Electronically Filed] Date 08 / 20 / 2016

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

CHERPAC

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="39389.70"/>	<input type="text" value="39389.70"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="57861.35"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10525.00"/>	<input type="text" value="71701.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="68386.35"/>	<input type="text" value="111090.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18719.73"/>	<input type="text" value="61424.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="49666.62"/>	<input type="text" value="49666.62"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CHERPAC

Report Covering the Period: From: 07 / 01 / 2016 To: 07 / 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).....	0.00	22500.00
(ii) Unitemized	25.00	1505.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	25.00	24005.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10500.00	47696.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10525.00	71701.00
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))..... ▶	10525.00	71701.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10525.00	71701.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	7386.57	26027.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7386.57	26027.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11333.16	34396.87
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	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	1000.00
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)) ..	18719.73	61424.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18719.73	61424.08

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)	10525.00	71701.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10525.00	71701.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7386.57	26027.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7386.57	26027.21

**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 18
<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

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)
CHERPAC

A. AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 520 N. NORTHWEST HIGHWAY
 City PARK RIDGE State IL Zip Code 60068
 FEC ID number of contributing federal political committee. **C** C00255752
 Name of Employer Occupation
 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
 07 / 11 / 2016
Transaction ID : C97
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. AMERICAS HEALTH INSURANCE PLANS PAC (AHIP PAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 PENNSYLVANIA AVENUE, NW
 SOUTH BUILDING, SUITE 500
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00106740
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : C96
 Amount of Each Receipt this Period
 1500.00
 Memo Item

C. BURLINGTON NORTHERN SANTA FE CORPORATION RAILPAC (BNSF RAILPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. Box 961039
 City Fort Worth State TX Zip Code 76161
 FEC ID number of contributing federal political committee. **C** C00235739
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2016
Transaction ID : C10684443
 Amount of Each Receipt this Period
 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 7 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CHERPAC

A. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1299 PENNSYLVANIA AVE NW
 SUITE 900
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00024869
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : C95
 Amount of Each Receipt this Period
 2000.00
 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
 M M / D D / Y Y Y Y Y Y
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	10500.00

**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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. ActBlue Technical Services

Mailing Address PO Box 441146

City Somerville State MA Zip Code 02144

Purpose of Disbursement
Credit Card Processing 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 / 14 / 2016

Transaction ID : D589923

Amount of Each Disbursement this Period

0.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address PO Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
In-Kind: Travel See Schedule B Line 23

Candidate Name

JACKY ROSEN

Office Sought: House Senate President
State: NV District: 03

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : D589900

Amount of Each Disbursement this Period

227.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Holiday Inn Express & Suites Belgrade

Mailing Address 309 W Madison Ave.

City Belgrade State MT Zip Code 59714

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name

DENISE JUNEAU FOR CONGRESS

Office Sought: House Senate President
State: MT District: 01

Disbursement For: 2016 Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2016

Transaction ID : D589902

Amount of Each Disbursement this Period

203.42

Memo Item

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

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

0.99

**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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. Holiday Inn Express Downtown Denver

Mailing Address 401 17th St

City State Zip Code
Denver CO 80202

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
GAIL SHERIDAN MS. SCHWARTZ

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 03

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : D589904

Amount of Each Disbursement this Period

130.23

Memo Item

Full Name (Last, First, Middle Initial)

B. Holiday Inn Express Downtown Denver

Mailing Address 401 17th St

City State Zip Code
Denver CO 80202

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
MORGAN CARROLL

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

MM / DD / YYYY
07 / 21 / 2016

Transaction ID : D589908

Amount of Each Disbursement this Period

130.23

Memo Item

Full Name (Last, First, Middle Initial)

C. Mandalay Bay

Mailing Address 3950 Las Vegas Blvd S

City State Zip Code
Las Vegas NV 89119

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
JACKY ROSEN

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: NV District: 03

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2016

Transaction ID : D589912

Amount of Each Disbursement this Period

144.48

Memo Item

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. Northside Rooftops LLC

Mailing Address 3617 N Sheffield Ave

City Chicago State IL Zip Code 60613

Purpose of Disbursement
PAC Fundraising Event Venue

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2016

Transaction ID : D589685

Amount of Each Disbursement this Period

2401.60

Memo Item

Full Name (Last, First, Middle Initial)

B. The Frost Group

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
PAC Fundraising Consulting 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 / 05 / 2016

Transaction ID : D589688

Amount of Each Disbursement this Period

3462.60

Memo Item

Full Name (Last, First, Middle Initial)

C. The Frost Group

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
PAC Fundraising Consulting 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 / 05 / 2016

Transaction ID : D114

Amount of Each Disbursement this Period

1000.00

Memo Item

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

6864.20

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
DENISE JUNEAU FOR CONGRESS

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: MT District: 01

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : **D589914**

Amount of Each Disbursement this Period

396.10

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
MORGAN CARROLL

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : **D589916**

Amount of Each Disbursement this Period

50.55

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel See Schedule B Line 23

Candidate Name
GAIL SHERIDAN MS. SCHWARTZ

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: CO District: 03

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : **D589919**

Amount of Each Disbursement this Period

50.55

Memo Item

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
PAC Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : D589920

Amount of Each Disbursement this Period

408.60

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

408.60

7273.79

**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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. Carroll for Colorado

Mailing Address PO BOX 470783

City State Zip Code
AURORA CO 80047

Purpose of Disbursement
PAC Contribution to Candidate Committee

011

Candidate Name

MORGAN CARROLL

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CO District: 06

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2016

Transaction ID : D589675

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address 1071 TWIN BRANCH LN

City State Zip Code
WESTON FL 33326

Purpose of Disbursement
PAC Contribution to Candidate Committee

011

Candidate Name

DEBBIE W WASSERMAN SCHULTZ

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: FL District: 20

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2016

Transaction ID : D589678

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address PO Box 20706

City State Zip Code
Atlanta GA 30320

Purpose of Disbursement
In-Kind: Travel

Candidate Name

JACKY ROSEN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

MM / DD / YYYY
07 / 07 / 2016

Transaction ID : D589905

Amount of Each Disbursement this Period

227.60

Memo Item

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

2227.60

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ANNA THRONE-HOLST

Mailing Address PO BOX 6

City SOUTHAMPTON State NY Zip Code 11969

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2016
 Primary General
 Other (specify) **Recount Contribution**

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2016

Transaction ID : **D589680**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Gail Schwartz for Congress

Mailing Address PO BOX 1209

City CRESTED BUTTE State CO Zip Code 81224

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name

GAIL SHERIDAN MS. SCHWARTZ

Office Sought: House
 Senate
 President
State: CO District: 03

Disbursement For: 2016
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 11 / 2016

Transaction ID : **D589681**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Holiday Inn Express & Suites Belgrade

Mailing Address 309 W Madison Ave.

City Belgrade State MT Zip Code 59714

Purpose of Disbursement
In Kind: Travel

Candidate Name

DENISE JUNEAU FOR CONGRESS

Office Sought: House
 Senate
 President
State: MT District: 01

Disbursement For: 2016
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2016

Transaction ID : **D589906**

Amount of Each Disbursement this Period

203.42

Memo Item

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

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

2203.42

**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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. Holiday Inn Express Downtown Denver

Mailing Address 401 17th St

City State Zip Code
Denver CO 80202

Purpose of Disbursement
In Kind: Travel

Candidate Name
GAIL SHERIDAN MS. SCHWARTZ

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: CO District: 03

Date of Disbursement

/ /

Transaction ID : **D589907**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Holiday Inn Express Downtown Denver

Mailing Address 401 17th St

City State Zip Code
Denver CO 80202

Purpose of Disbursement
In Kind: Travel

Candidate Name
MORGAN CARROLL

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: CO District: 06

Date of Disbursement

/ /

Transaction ID : **D589909**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Lindbeck for Alaska

Mailing Address PO BOX 90025

City State Zip Code
ANCHORAGE AK 99517

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
STEVE LINDBECK

Office Sought: House Senate President
Disbursement For: 2016
 Primary General Other (specify) ▼
State: AK District: 00

Date of Disbursement

/ /

Transaction ID : **D589542**

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. Mandalay Bay

Mailing Address 3950 Las Vegas Blvd S

City Las Vegas State NV Zip Code 89119

Purpose of Disbursement
In Kind: Travel

Candidate Name
JACKY ROSEN

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2016

Transaction ID : **D589913**

Amount of Each Disbursement this Period

144.48

Memo Item

Full Name (Last, First, Middle Initial)

B. MOWRER FOR IOWA

Mailing Address PO BOX 13470

City DES MOINES State IA Zip Code 50310

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
JIM MOWRER

Office Sought: House
 Senate
 President
State: IA District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : **D118**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEN FOR NEVADA

Mailing Address 1000 N. GREEN VALLEY PKWY
#440-177

City HENDERSON State NV Zip Code 89074

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
JACKY ROSEN

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 11 / 2016

Transaction ID : **D117**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

2144.48

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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. RUBEN KIHUEN FOR CONGRESS

Mailing Address P.O. BOX 458

City LAS VEGAS State NV Zip Code 89125

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
RUBEN KIHUEN

Office Sought: House
 Senate
 President
State: NV District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 14 / 2016

Transaction ID : D116

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Santarsiero for Congress

Mailing Address P.O. BOX 249

City NEWTON State PA Zip Code 18940

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
STEVEN J SANTARSIERO

Office Sought: House
 Senate
 President
State: PA District: 08

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : D589687

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Suozzi 2016

Mailing Address PO Box 669

City Glen Cove State NY Zip Code 11542

Purpose of Disbursement
PAC Contribution to Candidate Committee

Candidate Name
THOMAS MR SUOZZI

Office Sought: House
 Senate
 President
State: NY District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 18 / 2016

Transaction ID : D589541

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
CHERPAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel

Candidate Name
MORGAN CARROLL

Office Sought: House
 Senate
 President
State: CO District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : **D589917**

Amount of Each Disbursement this Period

50.55

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel

Candidate Name
DENISE JUNEAU FOR CONGRESS

Office Sought: House
 Senate
 President
State: MT District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : **D589918**

Amount of Each Disbursement this Period

396.10

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 5600 N River Rd

City Rosemont State IL Zip Code 60018-6705

Purpose of Disbursement
In Kind: Travel

Candidate Name
GAIL SHERIDAN MS. SCHWARTZ

Office Sought: House
 Senate
 President
State: CO District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 07 / 2016

Transaction ID : **D589915**

Amount of Each Disbursement this Period

50.55

Memo Item

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

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

497.20

11333.16