

**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

THE 2016 COMMITTEE

ADDRESS (number and street)

370 MAPLE AVENUE W

SUITE 4

VIENNA

VA

22180

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00569905

3. IS THIS REPORT

☐ NEW (N)

OR

☐ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☒ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

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

M M M / D D D / Y Y Y Y Y Y  
01 01 2017

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2017

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

Saracino, William, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Saracino, William, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 25 2017

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

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

THE 2016 COMMITTEE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2017</div></div>		<div><div></div><div>257803.79</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>257803.79</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>230657.03</div></div>	<div><div></div><div>230657.03</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>488460.82</div></div>	<div><div></div><div>488460.82</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>488460.82</div></div>	<div><div></div><div>488460.82</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>0.00</div></div>	<div><div></div><div>0.00</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	



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)

Page 3

Write or Type Committee Name

THE 2016 COMMITTEE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
01	/	01	/	2017

To:

M M	/	D D	/	Y Y Y Y Y Y
06	/	30	/	2017

**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).....

98731.00

98731.00

(ii) Unitemized .....

80408.01

80408.01

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

179139.01

179139.01

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

179139.01

179139.01

## 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).....

10206.41

10206.41

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

41311.61

41311.61

## 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)) .....

230657.03

230657.03

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

230657.03

230657.03

# **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 .....	316669.97	316669.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	316669.97	316669.97
22. Transfers to Affiliated/Other Party Committees.....	171790.85	171790.85
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	488460.82	488460.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	488460.82	488460.82

**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) .....	179139.01	179139.01
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	179139.01	179139.01
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	316669.97	316669.97
37. Offsets to Operating Expenditures (from Line 15, page 3).....	10206.41	10206.41
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	306463.56	306463.56

# **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 84

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Anderson, Richard, D, ,**

Mailing Address 9201 E Chino Dr

City  
 Scottsdale

State  
 AZ

Zip Code  
 85255-9111

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

**03 / 20 / 2017**

**Transaction ID : SA11AI.7195**

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Barry, Thomas, C, ,**

Mailing Address 604 Mount Olympus Blvd

City

New Smyrna Beach

State  
 FL

Zip Code  
 32166-2416

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**01 / 18 / 2017**

**Transaction ID : SA11AI.5552**

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**c. Black, Kathryn, B, ,**

Mailing Address 365 Windsor Dr N

City

Oxford

State  
 MS

Zip Code  
 38655-7092

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**02 / 06 / 2017**

**Transaction ID : SA11AI.5827**

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

# **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 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Blenis, Barry, , ,**

Mailing Address 80 Willowbrook Rd

City  
SurpriseState  
NYZip Code  
12176-2301FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2017

Transaction ID : SA11AI.4981

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Bonner, Virginia, W, ,**Mailing Address 7707 N Brookline Dr  
Apt 120City  
MadisonState  
WIZip Code  
53719-3531FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Transaction ID : SA11AI.6269

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**C. Braun, John, R, ,**

Mailing Address 6 Juxon Ct

City  
BaltimoreState  
MDZip Code  
21236FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2017

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period

225.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

1375.00

# **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 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Breski, John, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2017 <b>Transaction ID : SA11AI.4987</b>		
Mailing Address 168 Garden St			Amount of Each Receipt this Period 100.00		
City Schenectady	State NY	Zip Code 12306-2603	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 300.00		
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Britton, Lynda, R, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2017 <b>Transaction ID : SA11AI.5909</b>		
Mailing Address 9913 Lake Shore Blvd			Amount of Each Receipt this Period 5000.00		
City Cleveland	State OH	Zip Code 44108-1052	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 5000.00		
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Brown, Lionel, , , MD</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 17 / 2017 <b>Transaction ID : SA11AI.4220</b>		
Mailing Address 19 Shepard Hill Rd			Amount of Each Receipt this Period 100.00		
City Newtown	State CT	Zip Code 06470	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 300.00		
Name of Employer (for Individual) Danbury Orthopedics		Occupation (for Individual) Hand Surgeon	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			5200.00		
<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: PAGE 9 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Bryant, Anthony, W, ,**

Mailing Address 108 N Barstow St

City  
Waukesha

State  
WI

Zip Code  
53186

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Century Fence Co

Occupation (for Individual)  
Bus Exec

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  
03 / 17 / 2017

Transaction ID : SA11AI.4510

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Buening, Richard, F, ,**

Mailing Address 18660 N Highway 45

City  
Effingham

State  
IL

Zip Code  
62401-6961

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Buening Implement, Inc

Occupation (for Individual)  
Farm Equip Deal

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  
01 / 23 / 2017

Transaction ID : SA11AI.6499

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Bueschel, Howard, A, ,**

Mailing Address 107 Upper Ferry Rd

City  
Ewing

State  
NJ

Zip Code  
08628-1527

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2017

Transaction ID : SA11AI.4919

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Bueschel, Howard, A, ,**

Mailing Address 107 Upper Ferry Rd

City  
 Ewing

State  
 NJ

Zip Code  
 08628-1527

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2017

Transaction ID : SA11AI.4920

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. Bunge, Melvin, E, ,**

Mailing Address 2075 Trefoil Rd NE

City  
 Waverly

State  
 KS

Zip Code  
 66871-9305

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2017

Transaction ID : SA11AI.6606

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**C. Carkhuff, Diane, Edell, ,**

Mailing Address 915 N Pine Ave

City  
 Oklahoma City

State  
 OK

Zip Code  
 73130-2919

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 13 / 2017

Transaction ID : SA11AI.6720

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 84  
(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)  
**THE 2016 COMMITTEE**Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Cavender, Ann, E, ,**

Mailing Address 1242 Crown Ridge Dr

City  
PrescottState  
AZZip Code  
86301-6556FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	D D	Y Y Y Y
01	26	2017

Transaction ID : SA11AI.7186

Amount of Each Receipt this Period

500.00

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Cheshire, Harry, , , Jr**

Mailing Address 23861 Fairgreens E

City

Laguna Niguel

State

CA

Zip Code

92677-2436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

M M	D D	Y Y Y Y
02	06	2017

Transaction ID : SA11AI.7405

Amount of Each Receipt this Period

1175.00

☐ Memo ItemFull Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Cottrell, Robert, , ,**

Mailing Address 7 Wheelwright Cres

City

Hamilton

State

OH

Zip Code

45013

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RetiredOccupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	D D	Y Y Y Y
01	30	2017

Transaction ID : SA11AI.4443

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

1925.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Coulter, Robert, S, ,**

Mailing Address 608 E Deerfield St

City  
Springfield

State  
MO

Zip Code  
65807-5014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US Marine Corps

Occupation (for Individual)  
Ret Military

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 27 / 2017

Transaction ID : SA11AI.6585

Amount of Each Receipt this Period

950.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Coulter, Robert, S, ,**

Mailing Address 608 E Deerfield St

City  
Springfield

State  
MO

Zip Code  
65807-5014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
US Marine Corps

Occupation (for Individual)  
Ret Military

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2017

Transaction ID : SA11AI.6586

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Crossman, Robert, H, ,**

Mailing Address 8201 Arbor Ct

City  
Fort Myers

State  
FL

Zip Code  
33908-2866

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 23 / 2017

Transaction ID : SA11AI.5662

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2000.00

# **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 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Damon, Carolyn, J.,**

Mailing Address PO Box 791719

City  
PaiaState  
HIZip Code  
96779-1719FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2017

Transaction ID : SA11AI.7593

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**B. Dean, Scott, , ,**

Mailing Address 3025 Kings Harbour Rd

City

Panama City

State

FL

Zip Code

32405-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Nephrology Associate

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2017

Transaction ID : SA11AI.5566

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Dempsey, Robert, , ,**

Mailing Address 80 East Morris St

City

Philadelphia

State

PA

Zip Code

19148

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2017

Transaction ID : SA11AI.4274

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

900.00

# **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 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Depue, Paul, J, ,**

Mailing Address 6764 E Homer Baltimore Rd

City  
Homer

State  
NY

Zip Code  
13077

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 21 / 2017

Transaction ID : SA11AI.4256

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Donovan, Nancy, , ,**

Mailing Address PO Box 7882

City  
Jackson

State  
WY

Zip Code  
83002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2017

Transaction ID : SA11AI.4682

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Dorman, H, James, ,**

Mailing Address 142 Walnut Creek Road

City  
Cordova

State  
TN

Zip Code  
38018

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 23 / 2017

Transaction ID : SA11AI.4431

Amount of Each Receipt this Period

212.00

☐ Memo Item

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

912.00

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 15 OF 84  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Dunn, William, V, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 41964 Elsmere Rd City Ainsworth State NE Zip Code 69210-1752 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Self Occupation (for Individual) Farmer- Rancher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 335.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 24 / 2017 <b>Transaction ID : SA11Al.6663</b> Amount of Each Receipt this Period 335.00 <input type="checkbox"/> Memo Item
<b>B. Dunn, William, V, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 41964 Elsmere Rd City Ainsworth State NE Zip Code 69210-1752 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Self Occupation (for Individual) Farmer- Rancher Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 835.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2017 <b>Transaction ID : SA11Al.6664</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item
<b>C. Estes, Constance, L, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5434 E Lincoln Dr Apt 44 City Paradise Valley State AZ Zip Code 85253-4118 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 <b>Transaction ID : SA11Al.7115</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1335.00
<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: PAGE 16 OF 84  
(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)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Eyestone, Maynard, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 19 / 2017 <b>Transaction ID : SA11AI.4794</b>	
Mailing Address 2803 E Winger Rd			Amount of Each Receipt this Period 100.00	
City Mead	State WA	Zip Code 99021	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Eyestone, Maynard, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 19 / 2017 <b>Transaction ID : SA11AI.4795</b>	
Mailing Address 2803 E Winger Rd			Amount of Each Receipt this Period 100.00	
City Mead	State WA	Zip Code 99021	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Eyestone, Maynard, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 22 / 2017 <b>Transaction ID : SA11AI.4796</b>	
Mailing Address 2803 E Winger Rd			Amount of Each Receipt this Period 20.00	
City Mead	State WA	Zip Code 99021	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 345.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....▶			220.00	
<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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Fuchs, Diana, B, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3235 Maroneal St City Houston State TX Zip Code 77025-2020 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 21 / 2017 <b>Transaction ID : SA11AI.6837</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
<b>B. Garthwait, Robert, , , Sr</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 1367 City Waterbury State CT Zip Code 06721-1367 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Cly. Del Mfg. Co Occupation (for Individual) Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 26 / 2017 <b>Transaction ID : SA11AI.4871</b> Amount of Each Receipt this Period 3600.00 <input type="checkbox"/> Memo Item
<b>C. Gay, Lawrence, , , Jr</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 15970 SW 252nd St City Homestead State FL Zip Code 33031-2000 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 23 / 2017 <b>Transaction ID : SA11AI.5604</b> Amount of Each Receipt this Period 800.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			5400.00
<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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. George, Richard, N, ,**

Mailing Address 1 Sinclair Dr  
 Apt 218

City  
 Pittsford

State  
 NY

Zip Code  
 14534-1737

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2017

Transaction ID : SA11AI.5028

Amount of Each Receipt this Period

4000.00

☐ Memo Item

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

**B. Gillette, A, Glenn, ,**

Mailing Address 3311 Rossmoor Pkwy  
 Apt 3

City

Walnut Creek

State

CA

Zip Code

94595-3827

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1014.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2017

Transaction ID : SA11AI.7503

Amount of Each Receipt this Period

1014.00

☐ Memo Item

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

**C. Grobousky, J, , ,**

Mailing Address 2072 Ocean Ave  
 Apt 102

City

Brooklyn

State

NY

Zip Code

11230-7384

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Physician

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  
 02 / 06 / 2017

Transaction ID : SA11AI.4966

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

5514.00

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Ham, George, E, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 4304 S Mills St City Independence State MO Zip Code 64055-5135 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 02 / 2017 <b>Transaction ID : SA11AI.6549</b> Amount of Each Receipt this Period 1500.00 <input type="checkbox"/> Memo Item
<b>B. Heilman, Bruce, C, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 7031 Oak Brook Drive City Urbandale State IA Zip Code 50322 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2017 <b>Transaction ID : SA11AI.4495</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item
<b>C. Hennessy, Vincent, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 21321 Babcock Rd Bldg 1 City San Antonio State TX Zip Code 78255 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 18 / 2017 <b>Transaction ID : SA11AI.4644</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			2250.00
<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: PAGE 20 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Holmes, Walter, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 118 Golfview Dr City Albany State MN Zip Code 56307-9326 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 30 / 2017 <b>Transaction ID : SA11AI.6349</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>B. Hubbell, Dorothy, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9 Grandma's Path City Candler State NC Zip Code 28715 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Self Occupation (for Individual) Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 18 / 2017 <b>Transaction ID : SA11AI.4338</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Memo Item
<b>C. Huffman, Carol, K, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2527 Copper Creek Ln City Carrollton State TX Zip Code 75006-2023 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Self-Employed Occupation (for Individual) Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 <b>Transaction ID : SA11AI.6759</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1350.00
<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: PAGE 21 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

Mailing Address 9 Mountain Laurel Dr

City  
Greenwich

State  
CT

Zip Code  
06831-2741

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 24 / 2017

Transaction ID : SA11AI.4877

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Hunter, James, S, ,**

Mailing Address 19330 Beaufain St

City  
Cornelius

State  
NC

Zip Code  
28031-5531

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2017

Transaction ID : SA11AI.5371

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Ilsen, Roland, R, ,**

Mailing Address 6847 Abbottswood Dr

City  
Rancho Palos Verdes

State  
CA

Zip Code  
90275-3058

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2017

Transaction ID : SA11AI.7264

Amount of Each Receipt this Period

100.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

900.00

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

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

FOR LINE NUMBER: PAGE 22 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Ilsen, Roland, R, ,**

Mailing Address 6847 Abbottswood Dr

City Rancho Palos Verdes State CA Zip Code 90275-3058

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2017

Transaction ID : SA11AI.7265

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Jablonski, Donald, J, ,**

Mailing Address PO Box 1025

City Anna Maria State FL Zip Code 34216-1025

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2017

Transaction ID : SA11AI.5686

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Mailing Address 231 Fox Chapel Ln

City Chesterfield State MO Zip Code 63005-6905

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 26 / 2017

Transaction ID : SA11AI.6509

Amount of Each Receipt this Period

1175.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1375.00

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

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

FOR LINE NUMBER: PAGE 23 OF 84  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Johnson, James, A, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 08 / 2017 <b>Transaction ID : SA11AI.6835</b>		
Mailing Address 46 Stillforest St			Amount of Each Receipt this Period 250.00		
City Houston	State TX	Zip Code 77024-7518	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00		
Name of Employer (for Individual) Information Requested			Occupation (for Individual) Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Kapetansky, Fred, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 20 / 2017 <b>Transaction ID : SA11AI.5871</b>		
Mailing Address 2599 Sonata Dr			Amount of Each Receipt this Period 1000.00		
City Columbus	State OH	Zip Code 43209-3212	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1000.00		
Name of Employer (for Individual) Ohio State University			Occupation (for Individual) Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Keil, Edward, O, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 23 / 2017 <b>Transaction ID : SA11AI.4226</b>		
Mailing Address 401 E Atlantic Ave Kings Run Suite 215			Amount of Each Receipt this Period 50.00		
City Haddon Heights	State NJ	Zip Code 08035	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 250.00		
Name of Employer (for Individual) Retired			Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1300.00		
<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: PAGE 24 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Kelton, Eugene, , ,**

Mailing Address 2312 Amherst St

City  
Fort Collins

State  
CO

Zip Code  
80525-1826

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2017

Transaction ID : SA11AI.6980

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**B. Kirk, James, A, ,**

Mailing Address 6132 Rainbow Heights Rd

City  
Fallbrook

State  
CA

Zip Code  
92028-8847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2017

Transaction ID : SA11AI.7332

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Koch, Harry, A, , Jr**

Mailing Address 1302 S 101st St

City  
Omaha

State  
NE

Zip Code  
68124-1084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 18 / 2017

Transaction ID : SA11AI.6648

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1750.00



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

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

FOR LINE NUMBER: PAGE 25 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Krick, Donald, H, ,**

Mailing Address 840 Stoney Creek Dr  
Apt A

City  
Dauphin

State  
PA

Zip Code  
17018-9649

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2017

Transaction ID : SA11AI.5092

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Lanphier, Charles, , ,**

Mailing Address 4175 Kamalani Ln

City  
Princeville

State  
HI

Zip Code  
96722-5404

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 06 / 2017

Transaction ID : SA11AI.7586

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Leslie, William, F, ,**

Mailing Address 111 Starflower Dr

City  
Griffin

State  
GA

Zip Code  
30223-5799

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 15 / 2017

Transaction ID : SA11AI.5481

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

600.00

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Lynn, John, M.,**

Mailing Address 2354 Rosendale Village Ave

City  
Henderson

State  
NV

Zip Code  
89052-8732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

**02** / **08** / **2017**

**Transaction ID : SA11AI.7231**

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Mahoney, Edward, A.,**

Mailing Address 8445 Foxglove Ave NW

City  
Clinton

State  
OH

Zip Code  
44216-9502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

**03** / **03** / **2017**

**Transaction ID : SA11AI.5919**

Amount of Each Receipt this Period

1250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Mahoney, Edward, A.,**

Mailing Address 8445 Foxglove Ave NW

City  
Clinton

State  
OH

Zip Code  
44216-9502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2600.00

Date of Receipt

**03** / **23** / **2017**

**Transaction ID : SA11AI.5920**

Amount of Each Receipt this Period

1350.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

2850.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Marsh, Anthony, , ,**

Mailing Address 755 Sonne Dr

City  
 Annapolis

State  
 MD

Zip Code  
 21401-7120

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Savanna Comm. Corp.

Occupation (for Individual)  
 Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 14 / 2017

Transaction ID : SA11AI.5223

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Martin, Joyce, V, ,**

Mailing Address 1900 E Girard Pl  
 Apt 703

City  
 Englewood

State  
 CO

Zip Code  
 80113-3112

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 06 / 2017

Transaction ID : SA11AI.6956

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

**C. Mather, Richard, D, ,**

Mailing Address 16600 S State Route 291

City  
 Greenwood

State  
 MO

Zip Code  
 64034-9458

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Self

Occupation (for Individual)  
 Hone Builder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 16 / 2017

Transaction ID : SA11AI.6545

Amount of Each Receipt this Period

850.00

☐ Memo Item

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

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

3100.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 OF 84

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. McCullough, Nita, , ,**

Mailing Address 318 Pullman Rd

City  
De Queen

State  
AR

Zip Code  
71832-9222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2017

Transaction ID : SA11AI.6696

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**B. McDermott, Richard, , ,**

Mailing Address 3490 SE Doubleton Dr

City  
Stuart

State  
FL

Zip Code  
34997

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 10 / 2017

Transaction ID : SA11AI.4407

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. McMillan, Suzanne, , ,**

Mailing Address 15 Crystal Canyon Pl

City  
The Woodlands

State  
TX

Zip Code  
77389

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 26 / 2017

Transaction ID : SA11AI.4622

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1050.00

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

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

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. McMillan, Suzanne, , ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 03 / 16 / 2017</div> </div> <b>Transaction ID : SA11Al.4623</b>		
Mailing Address 15 Crystal Canyon Pl			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div>		
City The Woodlands	State TX	Zip Code 77389	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div>		
Name of Employer (for Individual) Retired			Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Meadows, Sue, , ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 03 / 20 / 2017</div> </div> <b>Transaction ID : SA11Al.5767</b>		
Mailing Address PO Box 293			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div>		
City Lowndesboro	State AL	Zip Code 36752-3201	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">400.00</div>		
Name of Employer (for Individual) Homemaker			Occupation (for Individual) homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mehrer, Morris, B, ,</b>			Date of Receipt <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 01 / 23 / 2017</div> </div> <b>Transaction ID : SA11Al.7682</b>		
Mailing Address 18622 SE 122nd St			Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div>		
City Issaquah	State WA	Zip Code 98027-6405	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>			Aggregate Year-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div>		
Name of Employer (for Individual) JosephSJefferson&SonInc			Occupation (for Individual) Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">1700.00</div>		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		

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

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

FOR LINE NUMBER: PAGE 30 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Moorhouse, John, W, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 971 Pamela Cir City Maineville State OH Zip Code 45039-8514 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 27 / 2017 <b>Transaction ID : SA11AI.5950</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item
<b>B. Moyer, Peter, W, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 118 Abbey Peak Ln City Incline Village State NV Zip Code 89451 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 30 / 2017 <b>Transaction ID : SA11AI.4711</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item
<b>C. Neithercott, Robert, A, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 188 City Bellevue State WA Zip Code 98009-0188 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 20 / 2017 <b>Transaction ID : SA11AI.7678</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1800.00
<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: PAGE 31 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Neuenschwander, Stephanie, , ,**

Mailing Address 195 Maple Path Pl

City  
Spring

State  
TX

Zip Code  
77382-3708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Outlook Wealth Advisors LLC

Occupation (for Individual)  
Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 21 / 2017

Transaction ID : SA11AI.6861

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Norfleet, Glenn, , ,**

Mailing Address 98 Bob White Dr

City

Manchester

State  
TN

Zip Code  
37355-5920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 30 / 2017

Transaction ID : SA11AI.5793

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

**C. Norfleet, Glenn, , ,**

Mailing Address 98 Bob White Dr

City

Manchester

State  
TN

Zip Code  
37355-5920

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 24 / 2017

Transaction ID : SA11AI.5794

Amount of Each Receipt this Period

200.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

850.00

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

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

FOR LINE NUMBER: PAGE 32 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. O'Neill, Harvey, E, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 143 Fontainebleau Dr City Mandeville State LA Zip Code 70471-6434 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 <b>Transaction ID : SA11AI.6680</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>B. Oslakovic, Charles, S, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9104 Howe Rd City Wonder Lake State IL Zip Code 60097-9181 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 24 / 2017 <b>Transaction ID : SA11AI.6432</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Memo Item
<b>C. Phillips, George, C, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 201 College Pl Apt 413 City Norfolk State VA Zip Code 23510-0913 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 31 / 2017 <b>Transaction ID : SA11AI.5289</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			800.00
<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: PAGE 33 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Porter, James, W, ,**

Mailing Address 4420 McFarlin Blvd

City  
Dallas

State  
TX

Zip Code  
75205-1631

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 19 / 2017

Transaction ID : SA11AI.6770

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Pretz, Jeanie, S, ,**

Mailing Address 100 N College Row  
Apt 140

City

Brevard

State  
NC

Zip Code  
28712-4875

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2017

Transaction ID : SA11AI.5393

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Remington, James, A, ,**

Mailing Address 2671 Trellis Green Cir

City

Henrico

State  
VA

Zip Code  
23233-6984

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2017

Transaction ID : SA11AI.5273

Amount of Each Receipt this Period

1250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1800.00

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

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

FOR LINE NUMBER: PAGE 34 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. Richards, Carol, H, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 3 Pursuit Unit 17A City Aliso Viejo State CA Zip Code 92656-4213 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 23 / 2017 <b>Transaction ID : SA11AI.7401</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item		
<b>B. Rosser, D, I, , Jr</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 1901 N Armistead Ave City Hampton State VA Zip Code 23666-4311 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) ICM Occupation (for Individual) Chair Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 06 / 2017 <b>Transaction ID : SA11AI.5293</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item		
<b>C. Rotan, Matthew, P, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 413 Longwoods Ln City Houston State TX Zip Code 77024-5616 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) ARA Newmark Inc Occupation (for Individual) Real Estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 <b>Transaction ID : SA11AI.6833</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Memo Item		
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00		
<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: PAGE 35 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Rust, Robert, W, ,**

Mailing Address 6670 Riviera Dr

City  
 Coral Gables

State  
 FL

Zip Code  
 33146-3529

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

28600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 10 / 2017

Transaction ID : SA11AI.5614

Amount of Each Receipt this Period

28600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Satrum, Karin, , ,**

Mailing Address 9751 S Highway 211

City  
 Canby

State  
 OR

Zip Code  
 97013-9538

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Willamette Egg Farm

Occupation (for Individual)  
 PT Clerical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 17 / 2017

Transaction ID : SA11AI.7607

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Schroeder, R, E, ,**

Mailing Address 831 W Ardussi St

City  
 Frankenmuth

State  
 MI

Zip Code  
 48734-1410

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 02 / 06 / 2017

Transaction ID : SA11AI.6121

Amount of Each Receipt this Period

450.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

29350.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Schroeder, R, E, ,**

Mailing Address 831 W Ardussi St

City  
Frankenmuth

State  
MI

Zip Code  
48734-1410

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2017

Transaction ID : SA11AI.6122

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

**B. Scott, Marc, H, ,**

Mailing Address 13939 Forest Hill Rd

City  
Grand Ledge

State  
MI

Zip Code  
48837-9253

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 14 / 2017

Transaction ID : SA11AI.6128

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**C. Seidel, Sharon, , ,**

Mailing Address 20 NE 471st Rd

City  
Clinton

State  
MO

Zip Code  
64735-9128

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2017

Transaction ID : SA11AI.6557

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1625.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 37 OF 84  
(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)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Shoemaker, Philip, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 02 / 2017 <b>Transaction ID : SA11AI.5358</b>	
Mailing Address 825 Ascot Ln			Amount of Each Receipt this Period 500.00	
City Raleigh	State NC	Zip Code 27615-1901	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Smith, William, B, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 02 / 2017 <b>Transaction ID : SA11AI.5676</b>	
Mailing Address 906 Snowberry Ln			Amount of Each Receipt this Period 500.00	
City Sanibel	State FL	Zip Code 33957-2914	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Star, Richard, W, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 20 / 2017 <b>Transaction ID : SA11AI.6244</b>	
Mailing Address 19045 Thomson Dr Unit I-204			Amount of Each Receipt this Period 500.00	
City Brookfield	State WI	Zip Code 53045-5174	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C				
Name of Employer (for Individual) Engman-Taylor Company		Occupation (for Individual) Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....▶			1500.00	
<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: PAGE 38 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<b>A. St Dennis, Jerry, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 2317 Turn Point Rd City Friday Harbor State WA Zip Code 98250-6019 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) W H Gates III Occupation (for Individual) Economist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 06 / 2017 <b>Transaction ID : SA11AI.7707</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Memo Item
<b>B. Steiner, Robert, G, ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address PO Box 514 City Chula Vista State CA Zip Code 91912-0514 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 15 / 2017 <b>Transaction ID : SA11AI.7316</b> Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Memo Item
<b>C. Stephenson, Virginia, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 30 Holly Ave Apt 401-O City Shalimar State FL Zip Code 32579-1158 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Retired Occupation (for Individual) Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 23 / 2017 <b>Transaction ID : SA11AI.5580</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1650.00
<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: PAGE 39 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Synnestvedt, Anne, T, ,**

Mailing Address PO Box 550

City

Bryn Athyn

State

PA

Zip Code

19009-0334

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2017

Transaction ID : SA11AI.5159

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. Szafarowicz, Eugene, E, ,**

Mailing Address PSC 76 Box 2664

City

APO

State

AP

Zip Code

96319-0005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

AAFES

Occupation (for Individual)

Retail Shift Mg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 16 / 2017

Transaction ID : SA11AI.7584

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

**C. Thorson, Thomas, A, ,**

Mailing Address PO Box 9

City

Mills

State

WY

Zip Code

82644-0009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Black Hills Bentonite Mining

Occupation (for Individual)

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 06 / 2017

Transaction ID : SA11AI.7041

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1300.00

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

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

FOR LINE NUMBER: PAGE 40 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Thunder-Haab, Keturah, , ,**

Mailing Address 436 Pine Brae Drive

City  
 Ann Arbor

State  
 MI

Zip Code  
 48105-2723

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 23 / 2017

Transaction ID : SA11AI.6067

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Thunder-Haab, Keturah, , ,**

Mailing Address 436 Pine Brae Drive

City  
 Ann Arbor

State  
 MI

Zip Code  
 48105-2723

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2017

Transaction ID : SA11AI.6068

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Tusha, Mary, Jean, ,**

Mailing Address 13140 del Monte Dr  
 Apt 52F

City  
 Seal Beach

State  
 CA

Zip Code  
 90740-4342

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 01 / 27 / 2017

Transaction ID : SA11AI.7287

Amount of Each Receipt this Period

300.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1050.00



# **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 41 OF 84

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Valentine, Allen, M, ,**

Mailing Address 35 Paige Cir

City  
Los Alamos

State  
NM

Zip Code  
87544-3638

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 20 / 2017

Transaction ID : SA11Al.7211

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Valerius, John, B, ,**

Mailing Address 1909 Canterbury St

City  
Irving

State  
TX

Zip Code  
75062-3551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2017

Transaction ID : SA11Al.6765

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Valerius, John, B, ,**

Mailing Address 1909 Canterbury St

City  
Irving

State  
TX

Zip Code  
75062-3551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 15 / 2017

Transaction ID : SA11Al.6766

Amount of Each Receipt this Period

1800.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

3850.00

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

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

FOR LINE NUMBER: PAGE 42 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

**A. Varsel, Charles, , ,**

Mailing Address 7907 Aleta Dr

City  
Spring

State  
TX

Zip Code  
77379-6104

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2017

Transaction ID : SA11AI.6857

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**B. Veazey, William, K, ,**

Mailing Address 2108 NW 61st St

City

Oklahoma City

State

OK

Zip Code

73112-7317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 23 / 2017

Transaction ID : SA11AI.6716

Amount of Each Receipt this Period

3500.00

☐ Memo Item

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

**C. Veenstra, Joann, , ,**

Mailing Address 15863 Sexton Rd

City

Escalon

State

CA

Zip Code

95320-9763

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self

Occupation (for Individual)

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 31 / 2017

Transaction ID : SA11AI.7526

Amount of Each Receipt this Period

850.00

☐ Memo Item

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

4550.00

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 43 OF 84  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Walsman, Richard, L, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 26 / 2017 <b>Transaction ID : SA11AI.5550</b>		
Mailing Address 1369 Pinekot Ct			Amount of Each Receipt this Period 250.00		
City The Villages	State FL	Zip Code 32163-2546	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00			
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Waters, Ann, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 22 / 2017 <b>Transaction ID : SA11AI.5038</b>		
Mailing Address 7529 Maples Rd			Amount of Each Receipt this Period 200.00		
City Little Valley	State NY	Zip Code 14755-9508	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00			
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Williams, John, R, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 07 / 2017 <b>Transaction ID : SA11AI.5184</b>		
Mailing Address 2 Coniston Dr			Amount of Each Receipt this Period 250.00		
City West Chester	State PA	Zip Code 19382-6937	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00			
Name of Employer (for Individual) Retired		Occupation (for Individual) Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			700.00		
<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: PAGE 44 OF 84

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

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

Mailing Address 1813 Tiki St

City  
Findlay

State  
OH

Zip Code  
45840-1756

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 20 / 2017

Transaction ID : SA11AI.5995

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Zimmerman, Lois, , ,**

Mailing Address 6909 Dr Martin Luther King Jr  
Apt 3

City

Saint Petersburg

State  
FL

Zip Code  
33705-6237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Retired

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2017

Transaction ID : SA11AI.5648

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

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

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

400.00

98731.00

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

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

FOR LINE NUMBER: PAGE 45 OF 84  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

<p><b>A. RST Marketing</b></p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 1272 Corporate Park Road</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Forest</td> <td style="width: 33%;">State VA</td> <td style="width: 33%;">Zip Code 24551</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer (for Individual) _____ Occupation (for Individual) _____</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">6498.90</span></p>			City Forest	State VA	Zip Code 24551	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>  03 / 28 / 2017</p> <p><b>Transaction ID : SA15.7851</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">6498.90</span></p> <p><input type="checkbox"/> Memo Item  Refund of Printing Expense</p>	
City Forest	State VA	Zip Code 24551					
<p><b>B. Webster Chamberlain and Bean</b></p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 1747 Pennsylvania Ave NW</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City Washington</td> <td style="width: 33%;">State DC</td> <td style="width: 33%;">Zip Code 20006</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer (for Individual) _____ Occupation (for Individual) _____</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">3707.51</span></p>			City Washington	State DC	Zip Code 20006	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>  02 / 09 / 2017</p> <p><b>Transaction ID : SA15.7852</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">3707.51</span></p> <p><input type="checkbox"/> Memo Item  Refund of Legal Expense</p>	
City Washington	State DC	Zip Code 20006					
<p><b>C.</b></p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address _____</p> <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">Zip Code</td> </tr> </table> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer (for Individual) _____ Occupation (for Individual) _____</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			City	State	Zip Code	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p> <p><input type="checkbox"/> Memo Item</p>	
City	State	Zip Code					
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">10206.41</span>				
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<span style="border: 1px solid black; padding: 2px;">10206.41</span>				

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

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

FOR LINE NUMBER: PAGE 46 OF 84

(check only one)

<input 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 checked="" 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)  
**THE 2016 COMMITTEE**

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

**A. Omega List Company**

Mailing Address 1420 Spring Hill Rd  
Suite 490

City  
McLean

State  
VA

Zip Code  
22102

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 ▼

14363.56

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 20 / 2017

Transaction ID : SA17.4203

Amount of Each Receipt this Period

14363.56

☐ Memo Item  
List Rental

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

**B. Omega List Company**

Mailing Address 1420 Spring Hill Rd  
Suite 490

City  
McLean

State  
VA

Zip Code  
22102

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 ▼

23428.63

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 10 / 2017

Transaction ID : SA17.4205

Amount of Each Receipt this Period

9065.07

☐ Memo Item  
List Rental

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

**C. Omega List Company**

Mailing Address 1420 Spring Hill Rd  
Suite 490

City  
McLean

State  
VA

Zip Code  
22102

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 ▼

41311.61

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 10 / 2017

Transaction ID : SA17.4206

Amount of Each Receipt this Period

17882.98

☐ Memo Item  
List Rental

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

41311.61

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

41311.61

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 84

<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

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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2017

Mailing Address 1360 Beverly Rd  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Payroll Service Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

861.74

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2017

Mailing Address 1360 Beverly Rd  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Payroll Service Fees

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : SB21B.4172

Amount of Each Disbursement this Period

87.09

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2017

Mailing Address 1360 Beverly Rd  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C** Transaction ID : SB21B.4183

Amount of Each Disbursement this Period

87.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1035.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2017

Mailing Address 1360 Beverly Rd  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Payroll Service Fees
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.4189

Amount of Each Disbursement this Period

87.09
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ADP**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2017

Mailing Address 1360 Beverly Rd  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Payroll Service Fee
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.4139

Amount of Each Disbursement this Period

87.09
-------

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Atkinson, Maurice, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		12		2017

Mailing Address 695 Friar Tuck Ln

City  
MaconState  
GAZip Code  
31220Purpose of Disbursement  
Social Media Consulting
Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB21B.4151

Amount of Each Disbursement this Period

750.00
--------

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

924.18
--------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Atkinson, Maurice, , ,**

Mailing Address 695 Friar Tuck Ln

City  
MaconState  
GAZip Code  
31220Purpose of Disbursement  
Social Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2017

FEC Identification Number

**C****Transaction ID : SB21B.4168**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Atkinson, Maurice, , ,**

Mailing Address 695 Friar Tuck Ln

City  
MaconState  
GAZip Code  
31220Purpose of Disbursement  
Social Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		07		2017

FEC Identification Number

**C****Transaction ID : SB21B.4175**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Atkinson, Maurice, , ,**

Mailing Address 695 Friar Tuck Ln

City  
MaconState  
GAZip Code  
31220Purpose of Disbursement  
Social Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		17		2017

FEC Identification Number

**C****Transaction ID : SB21B.4135**

Amount of Each Disbursement this Period

750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. California Department of Revenue**

Mailing Address P.O. Box 942867

City  
SacramentoState  
CAZip Code  
94267Purpose of Disbursement  
Tax Payment

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	3			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.4155

Amount of Each Disbursement this Period

279.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Campaign Funding Direct**

Mailing Address 1420 Spring Hill Road, Suite 490

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Fundraising Creative Copy/Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.7799

Amount of Each Disbursement this Period

3199.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Campaign Funding Direct**

Mailing Address 1420 Spring Hill Road, Suite 490

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Fundraising Creative Copy/Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	7		

FEC Identification Number

C

Transaction ID : SB21B.7821

Amount of Each Disbursement this Period

5310.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8788.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Campaign Funding Direct**

Mailing Address 1420 Spring Hill Road, Suite 490

City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Fundraising Creative Copy/Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	3				2	0						2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.7836**

Amount of Each Disbursement this Period

6151.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**Mailing Address 1593 Spring Hill Rd  
#400City  
ViennaState  
VAZip Code  
22182Purpose of Disbursement  
Computer Equipment/Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	1				0	1						2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.4144**

Amount of Each Disbursement this Period

4907.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**Mailing Address 1593 Spring Hill Rd  
#400City  
ViennaState  
VAZip Code  
22182Purpose of Disbursement  
Computer Equipment/Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	2				0	1						2	0	1	7

FEC Identification Number

**C****Transaction ID : SB21B.4171**

Amount of Each Disbursement this Period

2968.61

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

14027.59

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CMDI**Mailing Address 1593 Spring Hill Rd  
#400City  
ViennaState  
VAZip Code  
22182Purpose of Disbursement  
Computer Equipment/Software

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4188**

Amount of Each Disbursement this Period

2968.61

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Colortree Group, Inc.**

Mailing Address 8000 Villa Park Drive

City  
RichmondState  
VAZip Code  
23228Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7823**

Amount of Each Disbursement this Period

5571.57

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CP Direct**

Mailing Address 4600A Boston Way

City  
LanhamState  
MDZip Code  
20706Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7838**

Amount of Each Disbursement this Period

3378.06

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11918.24

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Department of Treasury**

Mailing Address P.O. Box 931000

City  
LouisvilleState  
KYZip Code  
40293Purpose of Disbursement  
Tax Payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2017

FEC Identification Number

**C****Transaction ID : SB21B.4181**

Amount of Each Disbursement this Period

273.83

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Desert Fox Strategic Communications**Mailing Address 5841 E Charleston Blvd  
Suite 230-226City  
Mt ReaganState  
NVZip Code  
89142Purpose of Disbursement  
Communications Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2017

FEC Identification Number

**C****Transaction ID : SB21B.4161**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Desert Fox Strategic Communications**Mailing Address 5841 E Charleston Blvd  
Suite 230-226City  
Mt ReaganState  
NVZip Code  
89142Purpose of Disbursement  
Communications Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

FEC Identification Number

**C****Transaction ID : SB21B.4186**

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)..... ►

2273.83

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Desert Fox Strategic Communications**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2017

Mailing Address 5841 E Charleston Blvd  
Suite 230-226City  
Mt ReaganState  
NVZip Code  
89142Purpose of Disbursement  
Communications Consulting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4133**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG Data Center**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2017

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - List Maintenance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.7784**

Amount of Each Disbursement this Period

90.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG Data Center**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2017

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - List Maintenance

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.7785**

Amount of Each Disbursement this Period

50.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1140.52

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - List Maintenance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2017

FEC Identification Number

**C****Transaction ID : SB21B.7786**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - List Maintenance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2017

FEC Identification Number

**C****Transaction ID : SB21B.7787**

Amount of Each Disbursement this Period

251.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - List Maintenance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2017

FEC Identification Number

**C****Transaction ID : SB21B.7788**

Amount of Each Disbursement this Period

1949.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2251.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7789**

Amount of Each Disbursement this Period

130.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Direct Mail - Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7790**

Amount of Each Disbursement this Period

159.29

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Fundraising Direct Mail Data Center

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7800**

Amount of Each Disbursement this Period

220.16

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

509.69



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Fundraising Direct Mail Data Center

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7826**

Amount of Each Disbursement this Period

4237.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ECG Data Center**Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012Purpose of Disbursement  
Fundraising Direct Mail Data Center

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2017

FEC Identification Number

**C****Transaction ID : SB21B.7839**

Amount of Each Disbursement this Period

3650.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. First Virginia Community Bank**

Mailing Address 11325 Random Hills Rd

City  
FairfaxState  
VAZip Code  
22030Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2017

FEC Identification Number

**C****Transaction ID : SB21B.7820**

Amount of Each Disbursement this Period

258.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8146.11

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. First Virginia Community Bank**

Mailing Address 11325 Random Hills Rd

City  
FairfaxState  
VAZip Code  
22030Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2017

FEC Identification Number

**C****Transaction ID : SB21B.7835**

Amount of Each Disbursement this Period

586.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. First Virginia Community Bank**

Mailing Address 11325 Random Hills Rd

City  
FairfaxState  
VAZip Code  
22030Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

FEC Identification Number

**C****Transaction ID : SB21B.7848**

Amount of Each Disbursement this Period

1039.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank & Company, p.c.**Mailing Address 1360 Beverly Road  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		11		2017

FEC Identification Number

**C****Transaction ID : SB21B.4147**

Amount of Each Disbursement this Period

12003.07

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

13628.88

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Frank & Company, p.c.**Mailing Address 1360 Beverly Road  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	7			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4167**

Amount of Each Disbursement this Period

10371.98

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Frank & Company, p.c.**Mailing Address 1360 Beverly Road  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	2			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4180**

Amount of Each Disbursement this Period

13315.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Frank & Company, p.c.**Mailing Address 1360 Beverly Road  
Suite 300City  
McLeanState  
VAZip Code  
22101Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4187**

Amount of Each Disbursement this Period

5309.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

28996.33

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Geary Porter & Donovan P.C.**

Mailing Address 16475 Dallas Pkwy # 400

City  
AddisonState  
TXZip Code  
75001Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2017

FEC Identification Number

**C****Transaction ID : SB21B.4173**

Amount of Each Disbursement this Period

1684.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Huckaby Davis Lisker**Mailing Address 228 S. Washington Street  
Suite 115City  
AlexandriaState  
VAZip Code  
22314Purpose of Disbursement  
FEC Compliance and Accounting

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7828**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. International Data Management, Inc.**

Mailing Address 490 White Pond Drive

City  
AkronState  
OHZip Code  
44320Purpose of Disbursement  
Direct Mail - Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2017

FEC Identification Number

**C****Transaction ID : SB21B.7791**

Amount of Each Disbursement this Period

341.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3525.92

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. International Data Management, Inc.**

Mailing Address 490 White Pond Drive

City  
AkronState  
OHZip Code  
44320Purpose of Disbursement  
Fundraising Direct Mail Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2017

FEC Identification Number

**C****Transaction ID : SB21B.7801**

Amount of Each Disbursement this Period

7.99

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. International Data Management, Inc.**

Mailing Address 490 White Pond Drive

City  
AkronState  
OHZip Code  
44320Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7829**

Amount of Each Disbursement this Period

185.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. International Data Management, Inc.**

Mailing Address 490 White Pond Drive

City  
AkronState  
OHZip Code  
44320Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7840**

Amount of Each Disbursement this Period

552.23

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

745.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Omega List Company**Mailing Address 1420 Spring Hill Rd  
Suite 490City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Fundraisign Direct Mail List Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7849**

Amount of Each Disbursement this Period

856.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Omega List Company**Mailing Address 1420 Spring Hill Rd  
Suite 490City  
McLeanState  
VAZip Code  
22102Purpose of Disbursement  
Fundraisign Direct Mail List Rental

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7850**

Amount of Each Disbursement this Period

1142.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Paramount Communications**

Mailing Address 525-K East Market Street Suite 114

City  
LeesburgState  
VAZip Code  
20176Purpose of Disbursement  
Fundraising Email Distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			1	7			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7803**

Amount of Each Disbursement this Period

637.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2636.93

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Paramount Communications**

Mailing Address 525-K East Market Street Suite 114

City  
LeesburgState  
VAZip Code  
20176Purpose of Disbursement  
Fundraising Email Distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7830**

Amount of Each Disbursement this Period

2564.32

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Paramount Communications**

Mailing Address 525-K East Market Street Suite 114

City  
LeesburgState  
VAZip Code  
20176Purpose of Disbursement  
Fundraising Email Distribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7841**

Amount of Each Disbursement this Period

1899.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Pinkston Group**

Mailing Address 5270 Shawnee Road Suite 102

City  
AlexandriaState  
VAZip Code  
22312Purpose of Disbursement  
Website Design and Development

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	9			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7805**

Amount of Each Disbursement this Period

6000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10463.62

# **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)

PAGE 64 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. RST Marketing**

Mailing Address 1272 Corporate Park Road

City  
Forest

State  
VA

Zip Code  
24551

Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 03 / 2017

FEC Identification Number

C

**Transaction ID : SB21B.7811**

Amount of Each Disbursement this Period

24425.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **B. RST Marketing**

Mailing Address 1272 Corporate Park Road

City  
Forest

State  
VA

Zip Code  
24551

Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 13 / 2017

FEC Identification Number

C

**Transaction ID : SB21B.7831**

Amount of Each Disbursement this Period

11311.84

☐ Memo Item

Full Name (Last, First, Middle Initial)

## **C. RST Marketing**

Mailing Address 1272 Corporate Park Road

City  
Forest

State  
VA

Zip Code  
24551

Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 13 / 2017

FEC Identification Number

C

**Transaction ID : SB21B.7842**

Amount of Each Disbursement this Period

22826.57

☐ Memo Item

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

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

58563.41



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Saracino, William, , ,**

Mailing Address 3625 Angelus Ave

City  
GlendaleState  
CAZip Code  
91208Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.4154**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Saracino, William, , ,**

Mailing Address 3625 Angelus Ave

City  
GlendaleState  
CAZip Code  
91208Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2017

FEC Identification Number

**C****Transaction ID : SB21B.4178**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Saracino, William, , ,**

Mailing Address 3625 Angelus Ave

City  
GlendaleState  
CAZip Code  
91208Purpose of Disbursement  
Expense Reimbursement: See Itemization Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		15		2017

FEC Identification Number

**C****Transaction ID : SB21B.4179**

Amount of Each Disbursement this Period

620.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2620.64

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Hertz**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	1	7		

Mailing Address 1700 Jefferson Davis Hwy

City  
ArlingtonState  
VAZip Code  
22202Purpose of Disbursement  
Car Rental

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4179.1**

Amount of Each Disbursement this Period

620.64

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Saracino, William, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	1	7		

Mailing Address 3625 Angelus Ave

City  
GlendaleState  
CAZip Code  
91208Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify)		

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4132**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Savanna Communications, LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	0			2	0	1	7		

Mailing Address 755 Sonne Drive

City  
AnnapolisState  
MDZip Code  
21041Purpose of Disbursement  
Issue Advertisement Production/Placement

Candidate Name

Category/  
TypeOffice Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.7844**

Amount of Each Disbursement this Period

20269.95

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

21269.95

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Savanna Communications LLC**

Mailing Address 755 Sonne Dr

City  
AnnapolisState  
MDZip Code  
21041Purpose of Disbursement  
General Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		11		2017

FEC Identification Number

**C****Transaction ID : SB21B.4148**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Savanna Communications LLC**

Mailing Address 755 Sonne Dr

City  
AnnapolisState  
MDZip Code  
21041Purpose of Disbursement  
General Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2017

FEC Identification Number

**C****Transaction ID : SB21B.4176**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Savanna Communications LLC**

Mailing Address 755 Sonne Dr

City  
AnnapolisState  
MDZip Code  
21041Purpose of Disbursement  
General Media Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2017

FEC Identification Number

**C****Transaction ID : SB21B.4137**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sisk Fulfillment Services**

Mailing Address 1900 Industrial Park Drive

City  
FederalsburgState  
MDZip Code  
21632Purpose of Disbursement  
Direct Mail - Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7795**

Amount of Each Disbursement this Period

481.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sisk Fulfillment Services**

Mailing Address 1900 Industrial Park Drive

City  
FederalsburgState  
MDZip Code  
21632Purpose of Disbursement  
Direct Mail - Storage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7796**

Amount of Each Disbursement this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sisk Fulfillment Services**

Mailing Address 1900 Industrial Park Drive

City  
FederalsburgState  
MDZip Code  
21632Purpose of Disbursement  
Fundraising Direct Mail Thank You Letters

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7812**

Amount of Each Disbursement this Period

199.36

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

716.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sisk Fulfillment Services**

Mailing Address 1900 Industrial Park Drive

City  
FederalsburgState  
MDZip Code  
21632Purpose of Disbursement  
Fundraising Direct Mail Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2017

FEC Identification Number

**C****Transaction ID : SB21B.7845**

Amount of Each Disbursement this Period

42.71

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting Bonus

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2017

FEC Identification Number

**C****Transaction ID : SB21B.4152**

Amount of Each Disbursement this Period

25000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	13	/	2017

FEC Identification Number

**C****Transaction ID : SB21B.4153**

Amount of Each Disbursement this Period

5208.33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

30251.04

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Expense Reimbursement: See Itemization Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	3		2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4166**

Amount of Each Disbursement this Period

1538.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta**

Mailing Address P.O. Box 20706

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
Air Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	3		2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4166.c**

Amount of Each Disbursement this Period

550.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hyatt**

Mailing Address 12777 Fair Lakes Cir

City  
FairfaxState  
VAZip Code  
22033Purpose of Disbursement  
Hotel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	3		2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4166.**

Amount of Each Disbursement this Period

525.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1538.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Avis**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		23		2017

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
Car Rental

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4166.1**

Amount of Each Disbursement this Period

363.07

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sousa, John, P., , IV**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		31		2017

Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4169**

Amount of Each Disbursement this Period

5208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sousa, John, P., , IV**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		31		2017

Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Expense Reimbursement: See Itemization Below

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.4170**

Amount of Each Disbursement this Period

687.09

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

5895.42

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Delta**

Mailing Address P.O. Box 20706

City  
AtlantaState  
GAZip Code  
30320Purpose of Disbursement  
Air Travel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4170.1**

Amount of Each Disbursement this Period

320.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hyatt**

Mailing Address 12777 Fair Lakes Cir

City  
FairfaxState  
VAZip Code  
22033Purpose of Disbursement  
Hotel

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4170.1**

Amount of Each Disbursement this Period

275.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Avis**

Mailing Address 6 Sylvan Way

City  
ParsippanyState  
NJZip Code  
07054Purpose of Disbursement  
Car Rental

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	1			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.4170.1**

Amount of Each Disbursement this Period

92.09

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0	0	0	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---	---



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		15		2017

FEC Identification Number

**C****Transaction ID : SB21B.4177**

Amount of Each Disbursement this Period

5208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		28		2017

FEC Identification Number

**C****Transaction ID : SB21B.4184**

Amount of Each Disbursement this Period

5202.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Sousa, John, P., , IV**Mailing Address 11 Talcott Forest Road  
Apt. CCity  
FarmingtonState  
CTZip Code  
06032Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2017

FEC Identification Number

**C****Transaction ID : SB21B.4130**

Amount of Each Disbursement this Period

5208.33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15618.99

# **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)

PAGE 74 OF 84

☒ 21b ☐ 22 ☐ 23 ☐ 26 ☐ 27  
☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sousa, John, P., , IV**

Mailing Address 11 Talcott Forest Road  
Apt. C

City  
Farmington

State  
CT

Zip Code  
06032

Purpose of Disbursement  
Political Strategy Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2017

FEC Identification Number

**C**

**Transaction ID : SB21B.4141**

Amount of Each Disbursement this Period

5208.33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Texas Workforce Commission**

Mailing Address 101 E 15th St, Rm 122

City  
Austin

State  
TX

Zip Code  
78778

Purpose of Disbursement  
Tax Payment

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 18 / 2017

FEC Identification Number

**C**

**Transaction ID : SB21B.4163**

Amount of Each Disbursement this Period

2148.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. US Postmaster**

Mailing Address 4410 Brookfield Corporate Dr

City  
Chantilly

State  
VA

Zip Code  
20153

Purpose of Disbursement  
Postal Box Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 18 / 2017

FEC Identification Number

**C**

**Transaction ID : SB21B.7807**

Amount of Each Disbursement this Period

885.00

☐ Memo Item

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

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

8241.41

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Valtim**

Mailing Address POST OFFICE BOX 809

City  
ForestState  
VAZip Code  
24551Purpose of Disbursement  
Fundraising Direct Mail Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			0	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7814**

Amount of Each Disbursement this Period

10150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Valtim**

Mailing Address POST OFFICE BOX 809

City  
ForestState  
VAZip Code  
24551Purpose of Disbursement  
Fundraising Direct Mail Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	3			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7834**

Amount of Each Disbursement this Period

15088.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City  
ChantillyState  
VAZip Code  
20151Purpose of Disbursement  
Bookkeeping

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	7		

FEC Identification Number

**C****Transaction ID : SB21B.7816**

Amount of Each Disbursement this Period

870.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

26108.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Washington Intelligence Bureau**

Mailing Address 4128 Pepsi Place

City  
ChantillyState  
VAZip Code  
20151Purpose of Disbursement  
Bookkeeping

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7846**

Amount of Each Disbursement this Period

1586.34

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. William J. Olson, p.c.**Mailing Address 370 Maple Ave W  
Suite 4City  
ViennaState  
VAZip Code  
22180Purpose of Disbursement  
Legal Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

FEC Identification Number

**C****Transaction ID : SB21B.4142**

Amount of Each Disbursement this Period

2346.04

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ZIP Mailing Services, Inc.**

Mailing Address 6304 Sheriff Rd. Ste Z

City  
LandoverState  
MDZip Code  
20785Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		23		2017

FEC Identification Number

**C****Transaction ID : SB21B.7818**

Amount of Each Disbursement this Period

15150.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

19082.38

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 84

<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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ZIP Mailing Services, Inc.**

Mailing Address 6304 Sheriff Rd. Ste Z

City  
LandoverState  
MDZip Code  
20785Purpose of Disbursement  
Fundraising Direct Mail Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		13		2017

FEC Identification Number

**C****Transaction ID : SB21B.7847**

Amount of Each Disbursement this Period

2057.88

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2057.88

315727.19

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" 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)  
**THE 2016 COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STARS AND STRIPES FOREVER PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2017

Mailing Address 228 S WASHINGTON STREET  
SUITE 115City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
Transfer to Affiliated Committee

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C C00635243

Transaction ID : SB22.4129

Amount of Each Disbursement this Period

171790.85

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

171790.85

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

171790.85

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 79 OF 84

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Funding Direct, Inc**Nature of Debt (Purpose):  
WebsiteMailing Address 1420 Spring Hill Road  
Suite490City  
McLeanState  
VAZip Code  
22102

Outstanding Balance Beginning This Period

65.68

Transaction ID : SD10.4103

Amount Incurred This Period

0.00

Payment This Period

65.68

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Campaign Funding Direct, Inc**Nature of Debt (Purpose):  
Website - DomainMailing Address 1420 Spring Hill Road  
Suite490City  
McLeanState  
VAZip Code  
22102

Outstanding Balance Beginning This Period

46.93

Transaction ID : SD10.4105

Amount Incurred This Period

0.00

Payment This Period

46.93

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**Nature of Debt (Purpose):  
Direct Mail - List MaintenanceMailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.4106

Amount Incurred This Period

0.00

Payment This Period

50.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 80 OF 84

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

80.53

Transaction ID : SD10.4108

Amount Incurred This Period

0.00

Payment This Period

80.53

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - Postage

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

130.24

Transaction ID : SD10.4109

Amount Incurred This Period

0.00

Payment This Period

130.24

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

90.52

Transaction ID : SD10.4110

Amount Incurred This Period

0.00

Payment This Period

90.52

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 81 OF 84

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.4111

Amount Incurred This Period

0.00

Payment This Period

50.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - Postage

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

159.29

Transaction ID : SD10.4112

Amount Incurred This Period

0.00

Payment This Period

159.29

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.4113

Amount Incurred This Period

0.00

Payment This Period

50.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

251.75

Transaction ID : SD10.4114

Amount Incurred This Period

0.00

Payment This Period

251.75

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ECG Data Center**

Nature of Debt (Purpose):

Direct Mail - List Maintenance

Mailing Address 1420 Spring Hill Road  
Suite 490City  
McLeanState  
VAZip Code  
22012

Outstanding Balance Beginning This Period

1949.79

Transaction ID : SD10.4115

Amount Incurred This Period

0.00

Payment This Period

1949.79

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Frank & Company, p.c.**

Nature of Debt (Purpose):

Accounting Services

Mailing Address 1360 Beverly Road  
Suite 300City  
McLeanState  
VAZip Code  
22101

Outstanding Balance Beginning This Period

12003.07

Transaction ID : SD10.4116

Amount Incurred This Period

0.00

Payment This Period

12003.07

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 83 OF 84

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**International Data Management, Inc.**

Nature of Debt (Purpose):

Direct Mail - Printing

Mailing Address 490 White Pond Drive

City  
AkronState  
OHZip Code  
44320

Outstanding Balance Beginning This Period

341.50

Transaction ID : SD10.4118

Amount Incurred This Period

0.00

Payment This Period

341.50

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sisk Fulfillment Services**

Nature of Debt (Purpose):

Direct Mail - Printing

Mailing Address 1900 Industrial Park Drive

City  
FedersburgState  
MDZip Code  
21632

Outstanding Balance Beginning This Period

7.20

Transaction ID : SD10.4120

Amount Incurred This Period

0.00

Payment This Period

7.20

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sisk Fulfillment Services**

Nature of Debt (Purpose):

Direct Mail - Printing

Mailing Address 1900 Industrial Park Drive

City  
FedersburgState  
MDZip Code  
21632

Outstanding Balance Beginning This Period

73.39

Transaction ID : SD10.4122

Amount Incurred This Period

0.00

Payment This Period

73.39

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 84 OF 84

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
**THE 2016 COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sisk Fulfillment Services**Nature of Debt (Purpose):  
Direct Mail - Printing

Mailing Address 1900 Industrial Park Drive

City  
FeddersburgState  
MDZip Code  
21632

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD10.4123

Amount Incurred This Period

0.00

Payment This Period

100.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sisk Fulfillment Services**Nature of Debt (Purpose):  
Direct Mail - Printing

Mailing Address 1900 Industrial Park Drive

City  
FeddersburgState  
MDZip Code  
21632

Outstanding Balance Beginning This Period

481.78

Transaction ID : SD10.4124

Amount Incurred This Period

0.00

Payment This Period

481.78

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Sisk Fulfillment Services**Nature of Debt (Purpose):  
Direct Mail - Storage

Mailing Address 1900 Industrial Park Drive

City  
FeddersburgState  
MDZip Code  
21632

Outstanding Balance Beginning This Period

35.00

Transaction ID : SD10.4125

Amount Incurred This Period

0.00

Payment This Period

35.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►