

# 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

Financial Services Roundtable PAC

ADDRESS (number and street) 600 13th Street, N.W.  
Suite 400  
Washington DC 20005-3005

Check if different than previously reported. (ACC)

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

C C00193177

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 02 / 01 / 2016 through [MM] / [DD] / [YYYY] 02 / 29 / 2016

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

Type or Print Name of Treasurer Francis Creighton

Signature of Treasurer Francis Creighton [Electronically Filed] Date 03 / 15 / 2016

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

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Financial Services Roundtable PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value="75044.10"/>	<input type="text" value="75044.10"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="69041.71"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="48500.55"/>	<input type="text" value="48501.16"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="117542.26"/>	<input type="text" value="123545.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21503.00"/>	<input type="text" value="27506.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="96039.26"/>	<input type="text" value="96039.26"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Financial Services Roundtable PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2500.00	2500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2500.00	2500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	46000.00	46000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	48500.00	48500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.55	1.16
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))..... ▶	48500.55	48501.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	48500.55	48501.16

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	27500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	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 .....	3.00	6.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21503.00	27506.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21503.00	27506.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	48500.00	48500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48500.00	48500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 15  
(check only one)  
 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)  
**Financial Services Roundtable PAC**

**A.** Full Name (Last, First, Middle Initial)  
**James D Weddle**

Mailing Address 1 Forest Ridge Place

City State Zip Code  
Saint Louis MO 63105-3007

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

Name of Employer Occupation  
Edward Jones Investments Managing Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A7028605C79894E69971**

Amount of Each Receipt this Period  
 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

**A. Assurant Inc. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 501 West Michigan Street  
 PO Box 3050  
 City Milwaukee State WI Zip Code 53201  
 FEC ID number of contributing federal political committee. **C** C00185694  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A3F5E6F3391A64159AC6**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Bank of America Corporation State and Federal PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1100 North King Street  
 City Wilmington State DE Zip Code 19884-0011  
 FEC ID number of contributing federal political committee. **C** C00043489  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A7F547DAFA1EC45959C4**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. COMPASS BANCPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 10566  
 City Birmingham State AL Zip Code 35296  
 FEC ID number of contributing federal political committee. **C** C00142596  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A9670E6EB1FE041BCBE0**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

**A. IBERIABANK FED PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 W.Congress Street

City Lafayette State LA Zip Code 70501-6873

FEC ID number of contributing federal political committee. **C** C00406066

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A3D45C80D52A04440A99**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B. New York Life Ins. Co. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 51 Madison Ave  
Room 1109

City New York State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : AD51D09CCC69D4565B14**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C. Synchrony Financial Employees PAC (SNYNPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 777 Long Ridge Road

City Stamford State CT Zip Code 06902-1247

FEC ID number of contributing federal political committee. **C** C00589119

Name of Employer Occupation

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  
 02 / 29 / 2016  
**Transaction ID : A81490E6694914830ACF**

Amount of Each Receipt this Period  
 1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 15
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

**A. TD Bank NA Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 317 MADISON AVENUE

City New York State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00501429

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A3B641427E3BE429C93B**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**B. Total System Services, Inc. PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 1755

City Columbus State GA Zip Code 31902

FEC ID number of contributing federal political committee. **C** C00441980

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 29 / 2016  
**Transaction ID : A822B522111444453BFC**

Amount of Each Receipt this Period  
 5000.00

Memo Item

**C. Unum PAC (UPPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Fountain Square

City Chattanooga State TN Zip Code 37402-1307

FEC ID number of contributing federal political committee. **C** C00177436

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 11 / 2016  
**Transaction ID : A81ED5BDD99654F38A17**

Amount of Each Receipt this Period  
 5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<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 10 OF 15  
(check only one)

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

**A.** Full Name (Last, First, Middle Initial)  
**VOYA FINANCIAL, INC., POLITICAL ACTION COMMITTEE (VOYA FINANCIAL PAC)**

Mailing Address **230 PARK AVENUE**  
**C/O CHIEF LEGAL OFFICER**

City **NEW YORK** State **NY** Zip Code **10169**

FEC ID number of contributing federal political committee. **C C00184028**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
**02 / 11 / 2016**

**Transaction ID : A4C09A29F1A2B4C4B9A6**

Amount of Each Receipt this Period  
**5000.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>46000.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

Full Name (Last, First, Middle Initial)

**A. Bill Foster For Congress Committee**

Mailing Address PO Box 703

City Geneva State IL Zip Code 60134

Purpose of Disbursement

Candidate Name  
**Rep. Bill Foster**

Office Sought:  House  
 Senate  
 President  
State: IL District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : **B4795FAB9F9E74604BC6**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Blaine For Congress**

Mailing Address P.O. Box 1526

City Columbia State MO Zip Code 65205-1526

Purpose of Disbursement

Candidate Name  
**Rep. Blaine Luetkemeyer**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : **BEECBA5B787FA4796AEF**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. David Scott For Congress**

Mailing Address 162 Hurt Street, NE

City Atlanta State GA Zip Code 30307-2538

Purpose of Disbursement

Candidate Name  
**Rep. David A. Scott**

Office Sought:  House  
 Senate  
 President  
State: GA District: 13

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2016

Transaction ID : **BA6B89B7D10A04419A2F**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Job Hensarling**

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

Candidate Name

**Rep. Job Hensarling**

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : B9C9DC91EDDD0489E877

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends Of Job Hensarling**

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

Candidate Name

**Rep. Job Hensarling**

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : B55AA7B74E06A4B25A36

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends Of Job Hensarling**

Mailing Address PO Box 820504

City Dallas State TX Zip Code 75382

Purpose of Disbursement

Candidate Name

**Rep. Job Hensarling**

Office Sought:  House  
 Senate  
 President  
State: TX District: 05

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2016

Transaction ID : B69CAFF4D0A564A22A2F

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)..... ▶

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Juan Vargas**

Mailing Address 330 Encinitas Blvd  
Suite 101

City Encinitas State CA Zip Code 92024-8705

Purpose of Disbursement

Candidate Name  
**Rep. Juan C. Vargas**

Office Sought:  House  
 Senate  
 President  
State: CA District: 51

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : BEE29D82439D4465D8E6

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Jim Himes For Congress**

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement

Candidate Name  
**Rep. Jim A. Himes**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Convention2016

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : B7FD4E38FF5894ACF9CD

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Majority Committee PAC**

Mailing Address PO Box 10134

City Bakersfield State CA Zip Code 93389

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
Leadership PAC2016

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : B82373A3931C04C8187C

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

Full Name (Last, First, Middle Initial)

**A. Portman For Senate Committee**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement

Candidate Name  
**Sen. Rob J. Portman**

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : **BA391DF4FF6EB424AA6**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Portman For Senate Committee**

Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement

Candidate Name  
**Sen. Rob J. Portman**

Office Sought:  House  
 Senate  
 President  
State: OH District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : **B72D9F5888934B9CA45**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Roskam For Congress Committee**

Mailing Address P. O. Box 713

City Wheaton State IL Zip Code 60187

Purpose of Disbursement

Candidate Name  
**Rep. Peter J. Roskam**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : **B6F2F8DA2BDCF4E6D9DC**

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)..... ▶

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Financial Services Roundtable PAC**

Full Name (Last, First, Middle Initial)

**A. Terri Sewell For Congress**

Mailing Address P.O. Box 1964

City Birmingham State AL Zip Code 35201

Purpose of Disbursement

Candidate Name  
**Rep. Terri A. Sewell**

Office Sought:  House  
 Senate  
 President  
State: AL District: 07

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
02 / 08 / 2016

Transaction ID : B95E319A4E1B24074962

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

1500.00

21500.00