PAGE 1 / 22

Image# 201606169018420095

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

						Office U	se Only	
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		nple: If typin the lines.	g, type	12FE4	1M5		
Stop Hillary PAC								1
ADDRESS (number and street)	203 South Union St	reet						
Check if different	Ste 300							
than previously reported. (ACC)	Alexandria				VA L	22314	1 -	
2. FEC IDENTIFICATION NU	IMBER ▼	CITY 🛦		5	STATE A		ZIP COD	E 🛦
C C00544767		3. IS THIS REPORT	N (N	EW I) <b>OR</b>	×	AMENDED (A)		
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	M	lay 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	Due On.	Mar 20 (M3)	J	un 20 (M6)		Sep 20 (M9)	ш.	Dec 20 (M12) (Non-Election Year Only)
April 15		Apr 20 (M4)	J	ul 20 (M7)	Ш	Oct 20 (M10)	Ш	Jan 31 (YE)
Quarterly Report (Q July 15	(c) 12-Day PRE-Elec		Primary (12P)		Ger	eral (12G)	i i	Runoff (12R)
Quarterly Report (Q	Report fo		Convention (1	2C)	Spe	cial (12S)		
October 15 Quarterly Report (Q	3)							
January 31 Year-End Report (Y	E)	Election on	M = M /	D D /	Y Y Y	Y	in the State of	
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Ele		General (30G	)	Run	off (30R)		Special (30S)
Termination Report (TER)	Report fo	r the:	M = M /	D D /	Y = Y = Y	Y	in the	
(IEN)		Election on					State of	
5. Covering Period 02	M / D D / Y	2016	through	M M 02	/ D 29	20	16	
I certify that I have examined thi	is Report and to the	best of my know	vledge and b	elief it is tru	e, correc	t and comple	te.	
Type or Print Name of Treasurer	Dan Backer							
						M = M / D	D / Y	/
Signature of Treasurer Dan E	Backer		[Electronically	Filed] D	ate	0616	L	2016
NOTE: Submission of false, errone	eous, or incomplete in	formation may sub	oject the pers	on signing th	is Report	to the penalti	es of 2 U	S.C. §437g.
Office						FEC	FOR	M 3X
Use Only							Rev. 12/20	

## SUMMARY PAGE OF RECEIPTS AND DISRUPSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Stop Hillary PAC 02 2016 02 29 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 116420.64 January 1, 2016 (b) Cash on Hand at 70019.57 Beginning of Reporting Period..... 38128.61 86099.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 202519.64 108148.18 6(a) and 6(c) for Column B)..... 42444.10 136815.56 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 65704.08 65704.08 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 9507.67 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Stop Hillary PAC	Stop	Hill	larv	PA	C
------------------	------	------	------	----	---

UMN B Year-to-Date
500.00
0.00
500.00
0.00
0.00
500.00
0.00
0.00
0.00
0.00
0.00
85599.00
0.00
0.00
0.00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	I. Disbursements COLUMN A Total This Period		
21. Operating Expenditures: (a) Allocated Federal/Non-Federal	Total Tills I Glod	Calendar Year-to-Date	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating	7 7		
Expenditures	0.00	73.29	
(c) Total Operating Expenditures		70.00	
(add 21(a)(i), (a)(ii), and (b))	0.00	73.29	
Transfers to Affiliated/Other Party Committees	0.00	0.00	
Contributions to     Federal Candidates/Committees			
and Other Political Committees	0.00	0.00	
4. Independent Expenditures	18820.86	28847.91	
(use Schedule E)5. Coordinated Party Expenditures	10020.00	20047.91	
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
,			
6. Loan Repayments Made	0.00	34507.06	
7. Loans Made	0.00	0.00	
8. Refunds of Contributions To:	7 7 7		
(a) Individuals/Persons Other Than Political Committees	420.00	430.00	
	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(655.156.155)			
(d) Total Contribution Refunds	420.00		
(add Lines 28(a), (b), and (c))	420.00	430.00	
9. Other Disbursements	23203.24	72957.30	
	7	7 7	
0. Federal Election Activity (2 U.S.C. §431(20	9))		
(a) Allocated Federal Election Activity			
(from Schedule H6) (i) Federal Share	0.00	0.00	
(1) 1 000101 011010			
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely	0.00	0.00	
With Federal Funds	0.00	0.00	
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00	
VIVI VIVI STATES			
1. Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	42444.10	136815.56	
2. Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	42444.10	136815.56	

### **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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	500.00
4. Total Contribution Refunds (from Line 28(d))	420.00	430.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	-420.00	70.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	73.29
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	73.29

### : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F3XA Transaction ID :

This report amended to update independent expenditure amounts and corresponding debts.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 OF 22 (check only one)  11a 11b 11c 12 13 14 15 16 🗙 17
	Statements may not be sold or used by any prine name and address of any political committee	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  ZANE CHILDERS  Mailing Address 209 SOUTH ALMOND  City OCILLA  FEC ID number of contributing federal political committee.  Name of Employer OCILLA RACING LLC  Receipt For:  Primary General Other (specify)	State Zip Code GA 31774-  C  Occupation BUSINESS OWNER  Aggregate Year-to-Date ▼  500.00	Date of Receipt  02 24 2016  Transaction ID: SA11.247044  Amount of Each Receipt this Period  500.00  Memo Item  CONTRIBUTION  NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial)  WILMA AND ART DODD  Mailing Address 33316 KLONDIKE PLACE  City  CASTLE ROCK  FEC ID number of contributing federal political committee.  Name of Employer  RETIRED  Receipt For:  Primary  General  Other (specify)   Other (specify)	State Zip Code CO 80108-  C  Occupation RETIRED  Aggregate Year-to-Date ▼  250.00	Date of Receipt  02 29 2016  Transaction ID: SA11.247039  Amount of Each Receipt this Period  250.00  Memo Item  CONTRIBUTION  NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial)  WYONIA FARNER  Mailing Address 12217 N NINE BARK ROAD  City HAUSER  FEC ID number of contributing federal political committee.  Name of Employer  SELF, RETIRED  Receipt For:  Primary General Other (specify)   Other (specify)	State Zip Code ID 83854-  C  Occupation  RETIRED REALTOR, OWNER  Aggregate Year-to-Date  250.00	Date of Receipt  02 29 2016  Transaction ID: SA11.247041  Amount of Each Receipt this Period  250.00  Memo Item  CONTRIBUTION  NON CONTRIBUTION ACCOUNT
SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line numbe	er only)	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 22 (check only one)						22	
TEMIZED RECEIPTS		for each category of the	11a 11b 11c 12							
		Detailed Summary Page		-	110	-	110	16	_	<b>\</b> 17
Any information copied from such Reports and St	tatamente ma	ny not ho sold or used by any no				of (				
or for commercial purposes, other than using the										
NAME OF COMMITTEE (In Full)										
Stop Hillary PAC										
Full Name (Last, First, Middle Initial)  A. YVONNE KOEHNEN			Dat	e of F	Receipt	t				
Mailing Address 3191 HIWAY 45				)2		о 22	/	2016		
City	State	Zip Code	Tr	ansac			A11.2			
GLENN	CA	95943-9653	Amo	ount o	f Each	n Re	ceipt t	his Peri	od	
FEC ID number of contributing federal political committee.	С				,			-	0.00	
Name of Employer	Occupation		-	Memo	ltem					
RETIRED	RETIRED		CON	TRIBL	JTION					
Receipt For:		·								
Primary General	Aggregate	Year-to-Date ▼	NON	CON	TRIRI	ITIO	N ACC	OUNT		
Other (specify)		250.00		0011	TRIBO	,,,,	11 700	00111		
		7	"							
Full Name (Last, First, Middle Initial)  3. WYONA MAGEE			Dat	e of F	Receipt	t				
Mailing Address 506 MATHESON PL				= M	_	1 D	/ Y	Y		
City	State	Zip Code		)2		29		2016	-	
CARY	NC	27511-					A11.2	<b>47040</b> his Peri	od	
				Julii O	Laci	1 110	ceipt t	1113 1 611	ou	
FEC ID number of contributing federal political committee.	C				7		-	25	0.00	
Name of Employer	Occupation		-	Memo	ltem					
RETIRED	RETIRED		CON	TRIBL	JTION					
Receipt For:		Voor to Data =								
Primary General	Aggregate	Year-to-Date ▼	NON	CON	TRIBLI	TIO	N ACC	OLINT		
Other (specify) ▼	1	250.00	Non	0011	TTT		17.00	00111		
		, ,	-							
Full Name (Last, First, Middle Initial)  YOLANDA ROBERTS			Dat	e of F	Receipt	t				
Mailing Address 1110 134TH STREET CT S				)2	_	10	/	2016		
City	State	Zip Code	Т	ansac	tion I	D : S	SA11.2			
TACOMA	WA	98444-	Amo	ount o	f Each	n Re	ceipt t	his Peri	od	
FEC ID number of contributing federal political committee.	С			Ξ	,	Ξ		25	0.00	
Name of Employer	Occupation		-	Memo	ltem					
RETIRED	RETIRED		CON	TRIB	JTION	l				
Receipt For:		Veer to Date =								
Primary General	Aggregate	Year-to-Date ▼	NON	CON	TRIRI	ITIO	N ACC	COUNT		
Other (specify)		250.00		JON	TAIDC	, 110	11 700	, JOINT		
<u> </u>										
SUBTOTAL of Receipts This Page (optional)					7		-7	75	0.00	

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

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 22 (check only one)
TEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	13 14 15 16 X 17
Any information copied from such Reports and or for commercial purposes, other than using the			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Stop Hillary PAC			
Full Name (Last, First, Middle Initial)  A. W STEVENSON			
Mailing Address 170 E 79TH ST. #2B			Date of Receipt
City	State	Zip Code	02 24 2016 Transaction ID : SA11.246987
NEW YORK CITY	NY	10075-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer	Occupation	1	Memo Item
RETIRED	RETIRED		CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial)  3. W STEVENSON			Date of Receipt
Mailing Address 170 E 79TH ST. #2B			02 24 _2016 _
City	State	Zip Code	Transaction ID : SA11.246988
NEW YORK CITY	NY	10075-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		50.00
Name of Employer RETIRED	Occupation RETIRED	1	Memo Item CONTRIBUTION
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	NON CONTRIBUTION ACCOUNT
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address 170 E 79TH ST. #2B			02 24 2016
City	State	Zip Code	Transaction ID : SA11.246989
NEW YORK CITY	NY	10075-	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		75.00
Name of Employer	Occupation	1	Memo Item CONTRIBUTION
RETIRED	RETIRED		CONTRIBUTION
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	NON CONTRIBUTION ACCOUNT
SUBTOTAL of Receipts This Page (optional)	1		175.00

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

Use separate schedule(s) for each category of the Detailed Summary Page    State   City   State   Zip Code	S	SCHEDULE A (FEC Form 3X)		FOR LINE NUMBER: PAGE 10 OF 22						
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 commencial purposes, other than using the name and address of any political committee to solicit contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions or for commencial purposes, other than using the name and address of any political committee to solicit contributions or for commencial purposes, other than using the name and address of any political committee.  Name of Employer Retails. First, Middle Initial)  A. W STEVENSON  Mailing Address 170 E 797H ST. #2B  City NY 10075-  FEC ID number of contributing toderal political committee.  Name of Employer  Retrined  Retrined  Retrined  Receipt for:  Primary Other (specify)   Aggregate Year-to-Date   Primary Other (specify)   FEC ID number of contributing toderal political committee.  Name of Employer  Receipt For:  Primary Other (specify)   FEC ID number of contributing toderal political committee.  Name of Employer  Receipt For:  Primary Other (specify)   Aggregate Year-to-Date   Amount of Each Receipt this Period  Memoltem  Amount of Each Receipt this Period										
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 commencial purposes, other than using the name and address of any political committee to solicit contributions from such committee.  NAME OF COMMITTEE (in Full)  SIOP Hilliary PAC  Full Name (Last, First, Middle Initial)  AW STEVENSON  Mailing Address 170 E 79TH ST. #2B  City  State  City  Memolten  Anount of Each Receipt this Period  Memolten  Anount of Eac	•	LIMIZED RECEIPTS								
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.    NAME of ConMITTEE (in Full)	_									
Stop Hillary PAC  Full Name (Last, First, Middle Initial)  Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  Backed For Primary General Occupation  FEC ID number of contributing (Clast, First, Middle Initial)  City State Zip Code NY 10075-  Tanasaction ID: SA11.246990  Amount of Each Receipt this Period  Tother (specify) ▼  Full Name (Last, First, Middle Initial)  B. Aggregate Year-to-Date ▼  Fill Name (Last, First, Middle Initial)  C. Mailing Address  City State Zip Code  Amount of Each Receipt This Period  Aggregate Year-to-Date ▼  Fill Name (Last, First, Middle Initial)  C. Mailing Address  City State Zip Code  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Amount of Each Receipt this Period	Ar or	for commercial purposes, other than using the	name and a	ay not be sold or used by any po- address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.					
Full Name (Last, First, Middle Initial)  A. WSTEVENSON  Mailing Address 170 E 79TH ST. #28  City  State Zip Code  NEW YORK CITY  NY 10075-  FEC ID number of contributing federal political committee.  Primary General Other (specify)  Mailing Address  City  State Zip Code  RETIRED  Full Name (Last, First, Middle Initial)  B. Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  Primary General Other (specify)   Memo Item  CONTRIBUTION ACCOUNT  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General Other (specify)   Wemo Item  Date of Receipt  Amount of Each Receipt this Period  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  City  State Zip Code  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Memo Item  This Period  FEC ID number of contributing federal political committee.  City  State Zip Code  Amount of Each Receipt this Period  Memo Item  This Period  This Period  This Period  Memo Item  This Period  Thi	$\setminus$									
A. W STEVENSON  Mailing Address 170 E 79TH ST. #2B  City  State Zip Code  NEW YORK CITY  Name of Employer  RetireD  And of Receipt this Period  Retering of Cocupation  Receipt For:  Perimany General Other (specify) ▼  Receipt For:  RetireD  RetireD  RetireD  Aggregate Year-to-Date ▼  Date of Receipt this Period  RetireD  Amount of Each Receipt this Period  RetireD  Ret										
City NEW YORK NEW YORK CONTRIBUTION  RETIRED CONTRIBUTION NON CONTRIBUTION ACCOUNT  NON CONTRIBUTION ACCOUNT  NON CONTRIBUTION ACCOUNT  Date of Receipt New York New Of Employer Nem of Employer Occupation  Receipt For: Primary General Other (specify) ▼  State Zip Code  Amount of Each Receipt this Period  Memo Item  Date of Receipt  Amount of Each Receipt this Period  The Year-to-Date ▼ Non Contributing For Year-to-Date ▼ Nem of Employer Occupation  Receipt For: Name of Employer Occupation  Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼  Amount of Each Receipt this Period  The Year Year-to-Date ▼ Other (specify) ▼  Amount of Each Receipt this Period  Amount of Each Re	Full Name (Last, First, Middle Initial)  W STEVENSON				Date of Receipt					
NEW YORK CITY FEC ID number of contributing federal political committee.  Name of Employer RETIRED Receipt For: Pfirmary General Other (specify) ▼ State Zip Code  FEC ID number of contributing federal political committee.  Receipt For: Pfirmary General Other (specify) ▼ State Zip Code  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Tother (specify) ▼  Total Name (Last, First, Middle Initial)  Fec ID number of contributing federal political committee.  The primary General of Employer  Tother (specify) ▼  Total Name (Last, First, Middle Initial)  C.  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Tother (specify) ▼  Amount of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Amount of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Employer  Amount of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Each Receipt this Period  Total Receipt For: Primary General Other (specify) ▼  Total Name of Each Receipt this Period		Mailing Address 170 E 79TH ST. #2B								
FEC ID number of contributing federal political committee.  Name of Employer RETIRED Receipt For: Primary General Other (specify) V State Zip Code  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) V State Zip Code  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) V  Aggregate Year-to-Date V  Date of Receipt this Period  FEC ID number of contributing federal political committee.  Receipt For: Primary General Other (specify) V  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  C  Memo Item  Aggregate Year-to-Date V  Date of Receipt this Period  FEC ID number of contributing federal political committee.  C  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  Amount of Each Receipt this Period  Memo Item  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Aggregate Year-to-Date V  Other (specify) V  Aggregate Year-to-Date V  Other (specify) V  Aggregate Year-to-Date V  To the fee primary General Other (specify) V  Aggregate Year-to-Date V  Aggregate Year-to-Date V  To the fee primary General Other (specify) V  Aggregate Year-to-Date V		City	State	•						
Substotal committee.   Cocupation   Cocupation   Memo Item   Contributing   General   Cocupation   Memo Item   Cocupation   General   General   Cocupation   General   Genera		NEW YORK CITY	NY	10075-	Amount of Each Receipt this Period					
RETIRED Receipt For:		· · · · · · · · · · · · · · · · · · ·	С							
RETIRED RECEIPT FOR:		Name of Employer	Occupation		Memo Item					
Receipt For:    Other (specify) ▼	RETIRED Receipt For:	• •			CONTRIBUTION					
Primary   General   250.00   NON CONTRIBUTION ACCOUNT										
Other (specify) ▼ 250.00  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial)  C. Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer Occupation  FEC ID number of contributing federal political committee.  Name of Employer Occupation  Receipt For: Aggregate Year-to-Date ▼  Other (specify) ▼  Substortal of Receipts This Page (optional)			Aggregate	Year-to-Date ▼	NON CONTRIBUTION ACCOUNT					
B. Mailing Address  City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For:  Other (specify) ▼  Aggregate Year-to-Date ▼  Primary  General  City State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Substotal of Receipts This Page (optional)					NON CONTRIBUTION ACCOUNT					
City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Perimary General Other (specify) ▼  C.  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  Date of Receipt  Aggregate Year-to-Date ▼  Date of Receipt  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	— В.				Date of Receipt					
Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer    Occupation					M = M / D = D / Y = Y = Y					
FEC ID number of contributing federal political committee.  Name of Employer    C		City	State	Zip Code	Amount of Each Receipt this Period					
Receipt For:   Primary   General   Other (specify) ▼		EEC ID number of contributing			Attribute of Each recorpt this i check					
Name of Employer    Receipt For:		· · · · · · · · · · · · · · · · · · ·	C							
Receipt For: Primary General Other (specify)   C.  Mailing Address City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)   Aggregate Year-to-Date   Amount of Each Receipt this Period  Memo Item  SUBTOTAL of Receipts This Page (optional)		Name of Frankria	Occupation							
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  C.  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify) ▼  Substotal of Receipts This Page (optional)		Name of Employer	Occupation							
Cty State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For:  Primary General Other (specify) ▼  Substotal of Receipts This Page (optional)		Receipt For:	Aggregate	Year-to-Date ▼						
C.  Mailing Address  City  State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For:  Primary General Other (specify) ▼  Substoctal of Receipts This Page (optional)				<u> </u>						
City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	_				-					
City State Zip Code  Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	C.	Moiling Address			<del>-</del>					
Amount of Each Receipt this Period  FEC ID number of contributing federal political committee.  Name of Employer  Occupation  Receipt For: Primary General Other (specify)   SUBTOTAL of Receipts This Page (optional)					M = M / D = D / Y = Y = Y					
Receipt For: Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)  Aggregate Year-to-Date ▼  75.00		City	State	Zip Code	Amount of Each Receipt this Period					
Name of Employer    Receipt For:		· · · · · · · · · · · · · · · · · · ·								
Receipt For: Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)  Aggregate Year-to-Date   75.00		federal political committee.								
Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)		Name of Employer	Occupation		Memo Item					
Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)		Receipt For:	Aggregate	Year-to-Date ▼						
SUBTOTAL of Receipts This Page (optional)		Primary General	/ iggi ogato	Tour to Bato V						
SUBTOTAL OF Necepts Trils Page (optional)		Other (specify) ▼		7 7						
	5	SUBTOTAL of Receipts This Page (optional)			75.00					
	$\vdash$	, -3- (-1		,	2000 65					

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

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	FOR LINE N (check only 21b	
	Detailed Summary Page	27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam	ents may not be sold or used e and address of any political	by any perso committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Stop Hillary PAC			
Full Name (Last, First, Middle Initial)  HARVEY ORLIN			Date of Disbursement
Mailing Address 2 WINDSOR DRIVE			02 17 2016
OLD WESTBURY	tate Zip Code NY 11568		Transaction ID : SB28A.I81596
Purpose of Disbursement REFUND OF CONTRIBUTION Candidate Name		Category/	Amount of Each Disbursement this Period
	ent For: Primary General Other (specify) ▼	Туре	Memo Item
Full Name (Last, First, Middle Initial)  3. HARVEY ORLIN			Date of Disbursement
Mailing Address 2 WINDSOR DRIVE			02 17 2016
,	tate Zip Code		Transaction ID : SB28A.I81597
OLD WESTBURY Purpose of Disbursement REFUND OF CONTRIBUTION	NY 11568		Amount of Each Disbursement this Period
Purpose of Disbursement		Category/	Amount of Each Disbursement this Period
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Disbursem Senate		Category/ Type	
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Disbursem Senate President	ent For: Primary General		100.00
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)	ent For: Primary General		100.00  Memo Item  Date of Disbursement
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  C. HARVEY ORLIN  Mailing Address 2 WINDSOR DRIVE  City S OLD WESTBURY	ent For: Primary General		Date of Disbursement
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  C. HARVEY ORLIN  Mailing Address 2 WINDSOR DRIVE	tate Zip Code NY 11568	Type  Category/	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  C. HARVEY ORLIN  Mailing Address 2 WINDSOR DRIVE  City SOLD WESTBURY Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate	tate Zip Code NY 11568	Type	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President State: District:  Full Name (Last, First, Middle Initial)  C. HARVEY ORLIN  Mailing Address 2 WINDSOR DRIVE  City SOLD WESTBURY Purpose of Disbursement REFUND OF CONTRIBUTION  Candidate Name  Office Sought: House Senate President	tate Zip Code NY 11568   Tent For:  General Other (specify) ▼   tent For:  Primary General Other (specify) ▼	Type  Category/ Type	Date of Disbursement  Man / Date of Disbursement  Man / Date of Disbursement  Man / Date of Disbursement  Transaction ID: SB28A.I81601  Amount of Each Disbursement this Period  25.00

TEMIZED DISBURSEMENTS	Llos concrete cohodulo(s)	LINE NUMBER: PAGE 12 OF 22   23   24   25   26   27   28a   28b   28c   X 29   30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  Stop Hillary PAC	ents may not be sold or used by any and address of any political commi	y person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A. DONNY FERGUSON  Mailing Address 101 SKYHILL ROAD  #203		Date of Disbursement  02 02 2016
City S: ALEXANDRIA Purpose of Disbursement CAREY DISBURSEMENT- POLITICAL AND CONTE Candidate Name  Office Sought: House Disbursem Senate F	Catego Type	
ALEXANDRIA Purpose of Disbursement CAREY DISBURSEMENT- FUNDRAISING FEE  Candidate Name  Office Sought: House Disbursem Senate President State: District:	cate Zip Code  'A 22314  Catego Type ent For: rimary General  ther (specify)   Table 1	
ALEXANDRIA Purpose of Disbursement CAREY DISBURSEMENT- LEGAL AND COMPLIAN Candidate Name  Office Sought: House Disbursem Senate F	Catego Type	
SUBTOTAL of Disbursements This Page (optional)		9895.24

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 13 OF 22
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	21b	22 23 24 25 26
		27	28a 28b 28c X 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)	is and address of any pointed		
Stop Hillary PAC			
Full Name (Last, First, Middle Initial)			
A. DB CAPITOL STRATEGIES			Date of Disbursement
Mailing Address 203 S UNION ST			02 25 2016
SUITE 300			02 20 2010
	State Zip Code		Transaction ID : SB29.I815851
ALEXANDRIA	VA 22314		11d115dCtiO11 ID . 3B23.1013031
Purpose of Disbursement CAREY DISBURSEMENT- LITIGATION SERVICES	3		Amount of Each Disbursement this Period
Candidate Name			Amount of Lacif Dispulsement this Period
		Category/ Type	6945.95
Office Sought: House Disbursen	nent For:	71	Memo Item
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			Data of Diahuraament
3. DB CAPITOL STRATEGIES			Date of Disbursement
Mailing Address 203 S UNION ST			02 25 2016
SUITE 300			
,	State Zip Code		Transaction ID : SB29.I815852
ALEXANDRIA Purpose of Disbursement	VA 22314		
CAREY DISBURSEMENT- LITIGATION SERVICES	S		Amount of Each Disbursement this Period
Candidate Name		Category/	
		Type	1535.00
Office Sought: House Disbursen			Memo Item
	Primary General		
President State: District:	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C- DB CAPITOL STRATEGIES			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 203 S UNION ST			02 25 2016
SUITE 300	State 7:- O-d-		<del></del>
,	State Zip Code VA 22314		Transaction ID: SB29.I815853
Purpose of Disbursement			
CAREY DISBURSEMENT- MEDIA SERVICES			Amount of Each Disbursement this Period
Candidate Name		Category/	75.00
Office Cought	ant Far	Туре	75.00
Office Sought: House Disbursen Senate	nent For:  Primary General		Memo Item
President	Other (specify)		
State: District:	- · · · (-		
SUBTOTAL of Disbursements This Page (optional)			8555.95
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)	11	FOR LINE NUMBER: PAGE 14 C				
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	c(s) (check only one)				
	Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c X 29 30b			
Any information copied from such Departs and Chita	nonte may not be sald as					
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
Stop Hillary PAC						
Full Name (Last, First, Middle Initial)						
DB CAPITOL STRATEGIES			Date of Disbursement			
Mailing Address 203 S UNION ST SUITE 300	7. 0. 1		02 25 2016			
City S ALEXANDRIA	State Zip Code VA 22314		Transaction ID: SB29.I815854			
Purpose of Disbursement						
CAREY DISBURSEMENT- MEETING EXPENSE			Amount of Each Disbursement this Period			
Candidate Name		Category/ Type	85.00			
Office Sought: House Disbursen	nent For:	rype	Memo Item			
	Primary General		c.iio itc.iii			
	Other (specify) ▼					
State: District: Full Name (Last, First, Middle Initial)						
3. EDONATION			Date of Disbursement			
Mailing Address 117 N ST ASAPH ST			02 29 2016			
City S ALEXANDRIA	State Zip Code VA 22314		Transaction ID : SB29.I81595			
Purpose of Disbursement			-			
CAREY DISBURSEMENT- MERCHANT PROCESS	SING FEES		Amount of Each Disbursement this Period			
Candidate Name		Category/	1807.20			
Office Sought: House Disbursen	nent For:	Туре	Memo Item			
Senate	Primary General		- memo nem			
	Other (specify) ▼					
State: District:  Full Name (Last, First, Middle Initial)						
C. HALT, BUZAS & POWELL, LTD			Date of Disbursement			
Mailing Address 1199 N FAIRFAX ST #1000			02 16 2016			
	State Zip Code		Transaction ID : SB29.I81592			
ALEXANDRIA Purpose of Disbursement	VA 22314		11 ali 3action 10 . 3023.10 1332			
CAREY DISBURSEMENT- ACCOUNTING SERVIC	ES		Amount of Each Disbursement this Period			
Candidate Name	Category/ Type	454.86				
Office Sought: House Disbursen	nent For:	Type	Memo Item			
Senate	Primary General		Memo item			
	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)			2347.06			
TOTAL This Period (last page this line number only)						

TEMIZED DISBURSEMENTS	Lies constate ashedula(s) FOR LIN			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	nents may not be sold or used e and address of any political	l by any perso	28a 28b 28c X 29 30b on for the purpose of soliciting contributions solicit contributions from such committee.	
Stop Hillary PAC  Full Name (Last, First, Middle Initial)				
Mailing Address 150 S WACKER DR #2600			Date of Disbursement  M M / D D / Y Y Y Y Y  02 16 2016	
City S CHICAGO	State Zip Code IL 60606		Transaction ID : SB29.I81593	
Purpose of Disbursement CAREY DISBURSEMENT- LEGAL SERVICES Candidate Name  Office Sought: House Disbursem		Category/ Type	Amount of Each Disbursement this Period  2375.00  Memo Item	
Senate	Primary General Other (specify) ▼		Mello itelli	
Full Name (Last, First, Middle Initial)  3.  Mailing Address			Date of Disbursement	
	State Zip Code			
Purpose of Disbursement  Candidate Name	Category/	Amount of Each Disbursement this Period		
		Type	Memo Item	
Full Name (Last, First, Middle Initial)			Date of Disbursement	
Mailing Address				
•	State Zip Code			
Purpose of Disbursement  Candidate Name	Category/ Type	Amount of Each Disbursement this Period		
Office Sought: House Disbursem Senate President State: District:		Memo Item		
SUBTOTAL of Disbursements This Page (optional)		··········· •	2375.00	
TOTAL This Period (last page this line number only).			23173.25	

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 16 OF
FOR LINE NUMBER:
(check only one)

9 **X** 10

NAME OF COMMITTEE (In Full) Stop Hillary PAC		
A. Full Name (Last, First, Middle Initial) of American Action News		Nature of Debt (Purpose): FEBRUARY MONTHLY ONLINE ADVERTISING FEES
Mailing Address 203 S Union St Suite 300		
City State Alexandria	Zip Code VA 22314	
Outstanding Balance Beginning This Per	iod	Transaction ID : SD.201601002
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2236.01	0.00	2236.01
B. Full Name (Last, First, Middle Initial) of	Debtor or Creditor	Nature of Debt (Purpose):
Campaign Solutions		FEBRUARY MONTHLY LIST RENTAL FEES
Mailing Address 117 N. SAINT ASAPH ST		_
City State Alexandria	Zip Code VA 22314	
Outstanding Balance Beginning This Per		Transaction ID : SD.201601003
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
2271.66	0.00	2271.66
C. Full Name (Last, First, Middle Initial) of Campaign Solutions	Debtor or Creditor	Nature of Debt (Purpose): Jan. Monthly External Deployment Costs
Mailing Address 117 N. Saint Asaph St		
City Alexandria	State Zip Code VA 22314	
Outstanding Balance Beginning This Per	iod	Transaction ID: SD.201601001
7091.17		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	7091.17	0.00
1) SUBTOTALS This Period This Page (option	onal)	4507.67
2) TOTALS This Period (last page this line n	number only)	
3) TOTAL OUTSTANDING LOANS from Sch	nedule C (last page only)	
4) ADD 2) and 3) and carry forward to appro	opriate 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)

FOR LINE NUMBER: (check only one)

PAGE

	9
X	10

22

17 OF

NAME OF COMMITTEE (In Full) Stop Hillary PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Aug/Sept Monthly Outbound Calling Costs MDS Communications Corp Mailing Address 545 W. Juanita Avenue State Zip Code Mesa 85210 Transaction ID: SD.2015001 Outstanding Balance Beginning This Period 9713.64 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 9713.64 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **December Monthly Advertising** MediaDC Mailing Address 1150 17th St NW Suite 503 City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD.2015010 440.05 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 440.05 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): FEBRUARY MONTHLY LIST RENTAL FEES Political List Brokers Mailing Address 107 S. West St PMB 826 City State Zip Code 22314 Alexandria VA Transaction ID: SD.201601004 Outstanding Balance Beginning This Period 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 5000.00 5000.00 0.00 5000.00 1) SUBTOTALS This Period This Page (optional)..... 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)

FOR LINE NUMBER: (check only one)

PAGE

18 OF

	9
X	10

22

NAME OF COMMITTEE (In Full) Stop Hillary PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Aug/Sept Monthly Digital Advertising The Washington Times Mailing Address 3600 New York Ave NE State Zip Code Washington 20002 Transaction ID: SD.2015007 Outstanding Balance Beginning This Period 1576.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1576.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 0.00 1) SUBTOTALS This Period This Page (optional)..... 9507.67 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... 9507.67 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TE	EMIZED INDEPENDENT EXPENDIT	rures					PAGE 19 FOR LINE 24	OF 22 FORM 3X
	AME OF COMMITTEE (In Full)					FEC II	DENTIFICATIO	N NUMBER ▼
5	Stop Hillary PAC					С	C00544767	
Ch	heck if 24-hour report 48-hour rep	eport New repo	ort An	nends repo	ort filed on	M = M	/ D D /	Y Y Y
	Full Name of Payee			Memo It	em Da	ate of Publi	c Distribution/E	Dissemination
	CAMPAIGN SOLUTIONS					M M M O1	04	2016
	Mailing Address 117 N. SAINT ASAPH ST				Ar	nount		
	City	State	Zip Code		$ \Gamma$			7091.17
	ALEXANDRIA	VA	22314				D: SE24.11741 ursement or Ol	
	Purpose of Expenditure JANUARY MONTHLY EXTERNAL DEPLOY	YMENT COSTS	Category/ Type			02	08	2016
	Name of Federal Candidate			Support	Office So	ught:	House D	District:
	HILLARY CLINTON			Oppose	X Pre		Senate	State:
	Out of the Vent To Date			<b></b>	Disburser	L	Primary	X General
	Calendar Year-To-Date Per Election for Office Sought		28847.91		2016	Other (sp		
	Full Name of Payee			Memo Ite	em Da	ate of Publi	ic Distribution/[	Dissemination
	MDS COMMUNICATIONS					M M	/ D D /	2015
	Mailing Address					08	10	2015
	545 W JUANITA AVE				Ar	mount		
	City	State	Zip Code					9713.64
	MESA	AZ	85210				D: SE24.11708 ursement or O	
	Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY OUTBO	OUND CALLING	Category/ Type		$\exists  \lfloor$	02	08	2016
	Name of Federal Candidate			Support	Office So	ought:	House [	District:
	HILLARY CLINTON		$\overline{X}$	Oppose	X Pre	esident	Senate	State:
	Calendar Year-To-Date					ment For:	Primary	X General
	Per Election for Office Sought		28847.91	1	2016	Other (sp		
							pecify;	
	(a) SUBTOTAL of Itemized Independent Ex	cpenditures			. •			16804.81
	(b) SUBTOTAL of Unitemized Independent	Expenditures						
					_			
	(c) TOTAL Independent Expenditures				. •	-		
	Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	y candidate or authorized						
	DAN BACKER	[Electron	ically Filed]	Date	M M M	/ 06	/ Y Y Y 2016	Y Y
	Signature		_	Date	′ L			

## SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES			PAGE 20 OF 22 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC			C C00544767
Check if 24-hour report 48-hour report	New report Amends	s report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	M <sub>6</sub>	emo Item D	Pate of Public Distribution/Dissemination
MEDIA DC			12 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1150 17TH STREET, NW		A	mount
SUITE 505		г	
City State	•	L	440.05
WASHINGTON, DC DC	20036		ansaction ID : SE24.81588 Pate of Disbursement or Obligation
Purpose of Expenditure DECEMBER MONTHLY ADVERTISING	Category/ Type		02 04 2016
Name of Federal Candidate	Suppe	ort Office So	ought: House District:
HILLARY CLINTON	∑ Oppo		esident Senate State:
Calendar Year-To-Date			ement For: Primary X General
Per Election for Office Sought	28847.91	2010	Other (specify) ►
Full Name of Payee	Mei	mo Item D	Date of Public Distribution/Dissemination
THE WASHINGTON TIMES			08 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3600 NEW YORK AVENUE NE		A	xmount
Chal	7: Code	г	1576.00
City Stat WASHINGTON DC		Tr	1576.00 ansaction ID : SE24.81589
	20002		Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY DIGITAL ADVERTISIN	NG Category/ Type		02 04 7 2016
Name of Federal Candidate	Supp	ort Office So	ought: House District:
HILLARY CLINTON	—————————————————————————————————————		resident Senate State:
Calendar Year-To-Date			ement For: Primary X General
Per Election for Office Sought	28847.91	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			2016.05
(a) SUBTOTAL OF REHIZED INDEPENDENT EXPENDITURES			2010.00
(b) SUBTOTAL of Unitemized Independent Expenditures		······ •	
		_	
(c) TOTAL Independent Expenditures		······	
Under penalty of perjury I certify that the independent exwith, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent.	authorized committee or ag		
DAN BACKER	[Electronically Filed]	Date 02	04 2016
Signature		Date 02	النتا النا ا

Signature

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITUR	RES				PAGE 21	OF 22
N	AME OF COMMITTEE (In Full)				T		OF FORM 3X
	Stop Hillary PAC					DENTIFICATIO	N NUMBER ▼
					C	C00544767	
С	heck if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M	/ D D /	Y Y Y
	Full Name of Payee AMERICAN ACTION NEWS		🔀 Memo It	em Dat	te of Publi	ic Distribution/D	Dissemination 2016
	Mailing Address 203 S UNION ST			Am	ount	النا	
	SUITE 300	State	Zip Code				2236.01
	ALEXANDRIA	VA	22314			<b>D : SE24.57116</b> ursement or Ob	
	Purpose of Expenditure FEBRUARY MONTHLY ONLINE ADVERTISING	G FEES	Category/ Type		03	01	2016
	Name of Federal Candidate		Support	Office Sou	ight:	House D	District:
	HILLARY CLINTON		X Oppose	X Pres	sident	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought	7	28847.91	Disbursem 2016	nent For: Other (sp	Primary pecify) ▶	X General
	Full Name of Payee CAMPAIGN SOLUTIONS		🗷 Memo Ite	em Da		ic Distribution/D	
	Mailing Address 447 N. SAINT ASABU ST				02	01	2016
	117 N. SAINT ASAPH ST			Am	nount		
	City	State	Zip Code				2271.66
	ALEXANDRIA	VA	22314	I		<b>D : SE24.57113</b> ursement or Ol	
	Purpose of Expenditure FEBRUARY MONTHLY LIST RENTAL FEES		Category/ Type		03	15	2016
	Name of Federal Candidate		Support	Office Sou	ught:	House D	District:
	HILLARY CLINTON		X Oppose	X Pres	sident	Senate	State:
	Calendar Year-To-Date Per Election for Office Sought		28847.91	Disbursem 2016	nent For:	Primary	X General
		,			Other (s	pechy)	
	(a) SUBTOTAL of Itemized Independent Expendent	ditures		· •	7	7	0.00
	(b) SUBTOTAL of Unitemized Independent Exp	enditures		·· •			
	(c) TOTAL Independent Expenditures			•		7	
	Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee o	ndidate or authorized	reported herein were d committee or agent of	not made in of either, or	n coopera (if the rep	ation, consultation orting entity is	on, or concert not a political
	DAN BACKER			M	/	/	V V

[Electronically Filed]

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Date

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### **SCHE** ITEMIZ

MIZED INDEPENDENT EXPENDITURES	i				PAGE 22	OF 22 24 OF FORM 3
ME OF COMMITTEE (In Full)				FEC.I		ION NUMBER 1
op Hillary PAC				FECT		ION NUMBER 1
					C00544767	
ck if 24-hour report 48-hour report	New re	eport Amends repo		M = M	/ D D	Y Y Y Y Y
Full Name of Payee POLITICAL LIST BROKERS LLC		<b>⊠</b> Memo l	tem Date	of Publ	ic Distributio	n/Dissemination
Mailing Addross			[	02	01	2016
Mailing Address 107 S WEST ST			Amo	unt		
PMB 826 City	State	Zip Code	$ \Gamma$			5000.00
ALEXANDRIA	VA	22314-2824			D : SE24.571 oursement or	17
Purpose of Expenditure FEBRUARY MONTHLY LIST RENTAL FEES		Category/ Type		03	01	2016
Name of Federal Candidate		Support	Office Soug	ht:	House	District:
HILLARY CLINTON		Oppose	X Presid	L	Senate	State:
Calendar Year-To-Date Per Election for Office Sought		28847.91	Disburseme		Prima	ry X Genera
Full Name of Payee	, , ,	☐ Memo Ito			pecify)	n/Dissemination
Tull Name of Layee			Date	M M	/ DISTRIBUTIO	/ Y Y Y Y
Mailing Address						
			Amo	unt		
City	State	Zip Code			,	
			Date	of Disk	oursement or	Obligation
Purpose of Expenditure		Category/ Type		M = M	/ D D	/
Name of Federal Candidate		Support	Office Soug	ht:	House	District:
		Oppose	Presi	dent	Senate	State:
Calendar Year-To-Date			Disburseme	nt For:	Prima	ry Genera
Per Election for Office Sought	7			Other (s	specify)	
a) SUBTOTAL of Itemized Independent Expenditure	es		· •		7	0.00
b) SUBTOTAL of Unitemized Independent Expendi	tures		<b>-</b>			
						18820.86

Under with, party committee) any political party committee or its agent.

DAN BACKER	[Electronically Filed]	Date	02 /	01	)16
Signature					