

# FEC FORM 3P

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

Example: If typing, type over the lines.

12FE4M5

MARCO RUBIO FOR PRESIDENT

ADDRESS (number and street)

PO BOX 558701

Check if different than previously reported. (ACC)

MIAMI

CITY

FL

STATE

33255

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00458844

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1)
- October 15 (Q3)
- July 15 (Q2)
- January 31 Year-End Report (YE)
- Feb 20 (M2)
- May 20 (M5)
- Mar 20 (M3)
- Jun 20 (M6)
- Apr 20 (M4)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11)
- Dec 20 (M12)
- Jan 31 (YE)

Thirtieth day report following the General Election

on  /  /

Twelfth day report preceding election

on  /  /  in the State of

Is this Report an Amendment?

yes

no

5. Covering Period

/  /

through

/  /

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

Lisa Lisker

Signature of Treasurer

Lisa Lisker

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Office Use Only

Write or Type Committee Name

# MARCO RUBIO FOR PRESIDENT

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

## SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	<input type="text" value="3736205.11"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	<input type="text" value="77814.72"/>
8. SUBTOTAL (Lines 6 and 7) .....	<input type="text" value="3814019.83"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	<input type="text" value="497148.16"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="3316871.67"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="2067041.07"/>
13. EXPENDITURES SUBJECT TO LIMITATION .....	<input type="text" value="0.00"/>

## NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	<input type="text" value="51692865.70"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="51673691.41"/>

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

**MARCO RUBIO FOR PRESIDENT**

Report Covering the Period: From:

MM / DD / YYYY  
04 / 01 / 2016

To:

MM / DD / YYYY  
04 / 30 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	-12935.00	37861742.61
(ii) unitemized .....	7076.39	13882269.13
(iii) Total contributions .....	-5858.61	51744011.74
(b) Political Party Committees .....	0.00	216.68
(c) Other Political Committees .....	0.00	1466245.06
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) .....	-5858.61	53210473.48
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	2700162.39
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	7733.85	470444.76
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	7733.85	470444.76
21. OTHER RECEIPTS (Dividends, Interest, etc.) .....	75939.48	346795.50
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	77814.72	56727876.13

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

**MARCO RUBIO FOR PRESIDENT**

Report Covering the Period: From:

MM / DD / YYYY  
04 / 01 / 2016

To:

MM / DD / YYYY  
04 / 30 / 2016

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

**COLUMN B  
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	363047.71	52144136.17
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	225000.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	129100.45	1298467.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees .....	5000.00	219140.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) .....	134100.45	1517607.78
29. OTHER DISBURSEMENTS .....	0.00	65780.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	497148.16	53952523.95

**III. CONTRIBUTED ITEMS  
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List) .....	0.00	
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FEC FORM 3P,  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES  
BY STATE FOR  
A PRESIDENTIAL CANDIDATE**  
(Used Only by Primary Committees Receiving  
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00458844

MARCO RUBIO FOR PRESIDENT

ADDRESS (number and street)

PO BOX 558701

MIAMI

CITY

FL

STATE

33255

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
<b>TOTALS</b>	<b>0.00</b>	<b>0.00</b>

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JOAN AARON**

Mailing Address 140 COUNTY ROAD 449

City State Zip Code  
WOODLAND AL 36280

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
212.00

**Transaction ID : SA17A.5007**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 17431 161ST AVE SE

City State Zip Code  
RENTON WA 98058

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
710.00

**Transaction ID : SA17A.5545**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 85 MOUNTAIN HIDEAWAY RD.

City State Zip Code  
BLUE RIDGE GA 30458

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
417.00

**Transaction ID : SA17A.5914**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
52.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 84.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD ALLIE**

Mailing Address **25 WILDWOOD RD**

City State Zip Code  
**PEMBROKE MA 02675**

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

Name of Employer Occupation  
**STEWARD HEALTH CARE STEWARD HEALTH CARE**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**382.00**

**Transaction ID : SA17A.5105**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 19 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**8.00**

Memo Item

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

Mailing Address **703 7TH TERRACE**

City State Zip Code  
**PALM BEACH GARDENS FL 33418**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**362.00**

**Transaction ID : SA17A.5021**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 16 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **703 7TH TERRACE**

City State Zip Code  
**PALM BEACH GARDENS FL 33418**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**372.00**

**Transaction ID : SA17A.5185**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 16 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**10.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **25.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL ANDERSON**

Mailing Address **606 SANDALWOOD DRIVE**

City State Zip Code  
**OLYMPIA WA 98938**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
**344.00**

**Transaction ID : SA17A.5262**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 19 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**14.00**

Memo Item

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

Mailing Address **2 DONDANVILLE RD, UNIT 601  
UNIT 601**

City State Zip Code  
**SAINT AUGUSTINE FL 32080**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
**1492.00**

**Transaction ID : SA17A.5017**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 16 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **2335 SW 80TH ST**

City State Zip Code  
**OCALA FL 34476**

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

Name of Employer Occupation  
**SELF-EMPLOYED RE BROKER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
**249.05**

**Transaction ID : SA17A.5065**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 16 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**7.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **28.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KAREN BAILEY**

Mailing Address 2335 SW 80TH ST

City	State	Zip Code
OCALA	FL	34476

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	RE BROKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5225**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3840 MAIN RD EAST

City	State	Zip Code
EMMAUS	PA	18049

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OTTERBINE	CEO

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5970**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 9301 SW 123 AVE

City	State	Zip Code
MIAMI	FL	33186

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	INSURANCE SALES

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5203**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JORGE BATISTA**

Mailing Address **22875 SW 123RD CT**

City **MIAMI** State **FL** Zip Code **33170**

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

Name of Employer **SMUCKER'S FOODSERVICE** Occupation **TECHNICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **739.00**

**Transaction ID : SA17A.5904**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									50.00

Memo Item

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

Mailing Address **1302 KERMIT DRIVE**

City **STATESBORO** State **GA** Zip Code **30458**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **1300.00**

**Transaction ID : SA17A.5972**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									100.00

Memo Item

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

Mailing Address **3412 223RD PL SE**

City **BOTHELL** State **WA** Zip Code **98021**

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

Name of Employer **BELGEM VENTURES, LLC** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **2100.00**

**Transaction ID : SA17A.6023**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									250.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 

									400.00
--	--	--	--	--	--	--	--	--	--------

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

--	--	--	--	--	--	--	--	--	--

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**NORBERTO BERNABEU**

Mailing Address 473 SHADY CREEK RD

City CLEAR BROOK State VA Zip Code 22624

FEC ID number of contributing federal political committee.

Name of Employer ADVERTISING RESOURCES INC Occupation PLANT MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5499**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5964 WOOLPER ROAD

City PETERSBURG State KY Zip Code 41080

FEC ID number of contributing federal political committee.

Name of Employer BANK TELLER Occupation 53 BANK

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5507**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5209 PRESTWICK ST

City VA BEACH State VA Zip Code 24018

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5940**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			19			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**GINETTE BOUDREAU**

Mailing Address **624 POINT RIDGE PL**

City **LAS VEGAS** State **NV** Zip Code **89145**

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

Name of Employer **CREEKSIDE HOME HEALTH** Occupation **R.N.**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1191.00**

**Transaction ID : SA17A.4928**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **4492 SECRETARIAT RUN**

City **BROOKSVILLE** State **FL** Zip Code **34609**

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

Name of Employer **SELF-EMPLOYED** Occupation **TEACHER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**417.00**

**Transaction ID : SA17A.5900**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address **531 BEDFORD ROAD**

City **CARLISLE** State **MA** Zip Code **02675**

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

Name of Employer **ACTUARY** Occupation **BOSTON BENEFITS CONSULTING, INC.**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1158.91**

**Transaction ID : SA17A.5483**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			18			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**22.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **79.00**

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CLAUDIA BROWN**

Mailing Address 19 MONKTON AVENUE

City	State	Zip Code
ETOBICOKE	VA	24018

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

Name of Employer	Occupation
MARY MOTHER OF GOD SCHOOL	VOLUNTEER TEACHER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

472.00

**Transaction ID : SA17A.5157**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 0.00     10.00     20.00     30.00     40.00     50.00     60.00     70.00     80.00     90.00     100.00

Memo Item

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

Mailing Address 30124 OAKMONT DR.

City	State	Zip Code
GEORGETOWN	TX	78628

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

**Transaction ID : SA17A.4664**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	6

CHARGED BACK

Amount of Each Receipt this Period  
 0.00     100.00     -1000.00

Memo Item

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

Mailing Address 1411 SYCAMORE LN

City	State	Zip Code
NORTHBROOK	IL	60062

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

860.00

**Transaction ID : SA17A.5974**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 0.00     100.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....  0.00     100.00     200.00     300.00     400.00     500.00     600.00     700.00     800.00     900.00     1000.00

-890.00

**Total This Period** (last page this line number only).....  0.00     100.00     200.00     300.00     400.00     500.00     600.00     700.00     800.00     900.00     1000.00

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**BILLIE BURNS**

Mailing Address 3709 FM 609

City State Zip Code  
LA GRANGE TX 78945

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
465.00

**Transaction ID : SA17A.5197**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 1692 S BROOKSTONE AVE

City State Zip Code  
BOISE ID 83709

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

Name of Employer Occupation  
PARAGON FINANCIAL GROUP INSURANCE AGENCY OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

**Transaction ID : SA17A.5879**

Date of Receipt  
MM / DD / YYYY  
04 / 02 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 142 GORDONHURST AVENUE

City State Zip Code  
UPPER MONTCLAIR NJ 08540

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

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
653.00

**Transaction ID : SA17A.5932**

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
73.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 133.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**GELCY CAPOTE**

Mailing Address 3239 SW 141ST AVENUE

City	State	Zip Code
MIAMI	FL	33175

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

Name of Employer	Occupation
WBDC OF FLORIDA	PROGRAM COPRDINATOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 225.00

**Transaction ID : SA17A.5721**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Memo Item

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

Mailing Address 5406 MEADOW HILL LOOP

City	State	Zip Code
LADY LAKE	FL	32159

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 376.00

**Transaction ID : SA17A.5621**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Memo Item

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

Mailing Address 16103 NE 2ND STREET

City	State	Zip Code
VANCOUVER	WA	98684

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

Name of Employer	Occupation
SAS RETAIL MARKETING	MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 385.00

**Transaction ID : SA17A.5818**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 35.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 85.00

**Total This Period** (last page this line number only).....▶ \_\_\_\_\_

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KENT CHANEY**

Mailing Address 9801 SHAWNEE TRAIL

City State Zip Code  
CENTERVILLE OH 45458

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

Name of Employer Occupation  
ALTERNATIVE COMPUTER TECHNOLOGY NETWORK ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.5503**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 4980 VETERANS WAY

City State Zip Code  
ELLIOTTSBURG PA 17024

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
328.00

**Transaction ID : SA17A.5031**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 4980 VETERANS WAY

City State Zip Code  
ELLIOTTSBURG PA 17024

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
345.00

**Transaction ID : SA17A.5394**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
17.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 49.00

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KIM CLAUSEN**

Mailing Address **4805 W 28 AVENUE**

City **DENVER** State **CO** Zip Code **80212**

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

Name of Employer **SELF-EMPLOYED** Occupation **MARKETING**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **2000.00**

**Transaction ID : SA17A.6025**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT-TO BE CHARGED BACK**

Amount of Each Receipt this Period  

250.00
--------

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. RODNEY G.B. CLEMENTS**

Mailing Address **479-B PARKRIDGE AVENUE**

City **ORANGE PARK** State **FL** Zip Code **32065**

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

Name of Employer **CORAM HEALTHCARE** Occupation **R.N.**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **385.00**

**Transaction ID : SA17A.5517**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  

25.00
-------

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**LINDA COLE-WEAVER**

Mailing Address **6036 204TH PL NE**

City **REDMOND** State **WA** Zip Code **98053**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **1630.00**

**Transaction ID : SA17A.5668**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  

25.00
-------

Memo Item

**Subtotal Of Receipts This Page** (optional)..... 

300.00
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**Total This Period** (last page this line number only)..... 

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**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 20 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**STEPHEN COLWELL**

Mailing Address 3301 CELINDA DRIVE

City State Zip Code  
CARLSBAD CA 92008

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5740**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**EMILY CONAWAY**

Mailing Address 420 EAST 25TH STREET

City State Zip Code  
ERIE PA 19152

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MU PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6017**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**EMILY CONAWAY**

Mailing Address 420 EAST 25TH STREET

City State Zip Code  
ERIE PA 19152

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MU PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5433**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LUCIA CONCEPCION**

Mailing Address **13730 SW 107TH AVE**

City **MIAMI** State **FL** Zip Code **33176**

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

Name of Employer **SEAGROVE REALTY** Occupation **REALTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**357.80**

**Transaction ID : SA17A.5676**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MS. PAULA V. CONLEY**

Mailing Address **2440 OLD GROVES ROAD #101**

City **NAPLES** State **FL** Zip Code **34109**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**746.05**

**Transaction ID : SA17A.5023**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **30 PORCHER ROAD**

City **OKATIE** State **SC** Zip Code **29909**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**800.00**

**Transaction ID : SA17A.5980**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**100.00**

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **132.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 22 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. YIPSIS COSTA**

Mailing Address 7110 MIAMI LAKES WAY SOUTH

City State Zip Code  
MIAMI LAKES FL 33014

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

Name of Employer Occupation  
MANUEL COSTA DENTAL OFFICE DENTAL HYGIENIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1364.00

**Transaction ID : SA17A.5966**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 14 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 509 48TH AVENUE

City State Zip Code  
LONG ISLAND CITY NY 11101

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

Name of Employer Occupation  
HILTON WORLDWIDE HUMAN RESOURCES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.5956**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 03 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 12609 ROBISON BLVD #105

City State Zip Code  
POWAY CA 92064

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
242.00

**Transaction ID : SA17A.5389**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
17.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 217.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MS. DEBORAH COX-ROUSH**

Mailing Address 5710 HERONPARK PL

City LITHIA State FL Zip Code 33547

FEC ID number of contributing federal political committee.

Name of Employer DCR CREATIVE SOLUTIONS Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5523**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 640 BRIGHTSIDE LANE

City PASADENA State CA Zip Code 91107

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5881**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 217 WOODLEIGH PARK DRIVE

City COLUMBIA State SC Zip Code 29909

FEC ID number of contributing federal political committee.

Name of Employer CPA CONSULTANT Occupation SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5519**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			18			2016			

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 24 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**BRENT DAVIS**

Mailing Address 4209 LASSITER MILL #238

City State Zip Code  
RALEIGH NC 27609

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DELOITTE SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5525**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="25.00"/>
------------------------------------

Memo Item

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

**BRENT DAVIS**

Mailing Address 4209 LASSITER MILL #238

City State Zip Code  
RALEIGH NC 27609

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DELOITTE SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5757**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="30.00"/>
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Memo Item

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

**GREG DEMONTEVERDE**

Mailing Address 1130 CORONET AVE

City State Zip Code  
PASADENA CA 91107

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DIGNITY HEALTH IT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5233**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="12.00"/>
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Memo Item

**Subtotal Of Receipts This Page (optional)**.....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH DESILETS**

Mailing Address 13009 KINGSWELL DRIVE

City State Zip Code  
WOODBRIIDGE VA 24018

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

Name of Employer Occupation  
CAMPAIGN MANAGER ANDREW LEWIS FOR STATE SENATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
240.00

**Transaction ID : SA17A.5847**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

**PRIMARY DEBT**

Amount of Each Receipt this Period  
44.00

Memo Item

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

Mailing Address 350 FIRST AVENUE APT 13 B

City State Zip Code  
NEW YORK NY 10010

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

Name of Employer Occupation  
REED SMITH LLP LAWYER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
525.00

**Transaction ID : SA17A.5599**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

**PRIMARY DEBT**

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 25 TUDOR CITY PLACE

City State Zip Code  
NEW YORK NY 14626

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

Name of Employer Occupation  
SELF WRITER-EDITOR-TRANSLATOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
906.75

**Transaction ID : SA17A.5916**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

**PRIMARY DEBT**

Amount of Each Receipt this Period  
52.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 121.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JENNIFER DIJAK**

Mailing Address 2233 BAY POINTE DR.

City State Zip Code  
HIXSON TN 37343

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

**Transaction ID : SA17A.5543**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MS. PEGGY S. DONOHUE**

Mailing Address 76298 VIA VOLTERRA

City State Zip Code  
INDIAN WELLS CA 92210

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
535.00

**Transaction ID : SA17A.5220**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
11.00

Memo Item

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

Mailing Address 3510 150TH ST

City State Zip Code  
FLUSHING NY 11354

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

Name of Employer Occupation  
TEACHER BRONX COMPASS HIGH SCHOOL

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
232.15

**Transaction ID : SA17A.4741**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
2.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 38.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 27 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MARGARET M. DOYLE**

Mailing Address 6704 W SHADOW VALLEY RD

City State Zip Code  
ROGERS AR 71953

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

Name of Employer Occupation  
LEGAL/HR UNEMPLOYED-SEEKING EMPLOYMENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
613.00

**Transaction ID : SA17A.5750**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
28.50

Memo Item

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

Mailing Address 108 TURTLE RIDGE DR

City State Zip Code  
BRANDON MS 39047

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

Name of Employer Occupation  
STUBBS NK CONTRACTORS CONSTRUCTION MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
254.00

**Transaction ID : SA17A.5209**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 869 W KENDALL STREET

City State Zip Code  
CORONA CA 92882

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

Name of Employer Occupation  
LEGALSHIELD AFFILIATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
221.00

**Transaction ID : SA17A.5382**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
17.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 55.50

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 28 / 208

(check only one)  
 16  17a  17b  17c  17d  18  
 19a  19b  20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN ELDER**

Mailing Address 11 FOREST GLEN LN SW

City LAKESIDE State WA Zip Code 98498

FEC ID number of contributing federal political committee.

Name of Employer TAA Occupation PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4679**

Date of Receipt  
 /  /

**CHARGED BACK**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 9974 OAK QUART DR.

City ORLANDO State FL Zip Code 32832

FEC ID number of contributing federal political committee.

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5541**

Date of Receipt  
 /  /

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3065 NY ST

City MIAMI State FL Zip Code 33133

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation BUSINESSMAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5063**

Date of Receipt  
 /  /

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 29 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**OMAR FERREIRA**

Mailing Address 101 WEST 126TH STREET  
APT 2B

City State Zip Code  
NEW YORK NY 14626

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

Name of Employer Occupation  
REAL ESTATE FINANCE CUSHMAN & WAKEFIELD

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
275.00

**Transaction ID : SA17A.5597**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 10961 ALTA VIEW DRIVE

City State Zip Code  
STUDIO CITY CA 91604

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

Name of Employer Occupation  
WRITER SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
635.00

**Transaction ID : SA17A.4715**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
-10.00

Memo Item

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

Mailing Address 10961 ALTA VIEW DRIVE

City State Zip Code  
STUDIO CITY CA 91604

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

Name of Employer Occupation  
WRITER SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
625.00

**Transaction ID : SA17A.4716**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 20 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
-10.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 5.00

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 30 / 208

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JEAN FLEMING**

Mailing Address 10961 ALTA VIEW DRIVE

City	State	Zip Code
STUDIO CITY	CA	91604

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

Name of Employer	Occupation
WRITER	SELF

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 615.00

**Transaction ID : SA17A.4717**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 20 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
 \_\_\_\_\_ -10.00

Memo Item

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

Mailing Address 10961 ALTA VIEW DRIVE

City	State	Zip Code
STUDIO CITY	CA	91604

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

Name of Employer	Occupation
WRITER	SELF

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 605.00

**Transaction ID : SA17A.4718**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 20 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
 \_\_\_\_\_ -10.00

Memo Item

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

Mailing Address 10961 ALTA VIEW DRIVE

City	State	Zip Code
STUDIO CITY	CA	91604

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

Name of Employer	Occupation
WRITER	SELF

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 595.00

**Transaction ID : SA17A.4719**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 20 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
 \_\_\_\_\_ -10.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ -30.00

**Total This Period** (last page this line number only).....▶ \_\_\_\_\_

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD FOSS**

Mailing Address 18 ROSEWOOD CT.

City	State	Zip Code
BLOOMINGTON	IL	61704

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5777**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="30.00"/>
------------------------------------

Memo Item

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

Mailing Address 11235 KEITH

City	State	Zip Code
BEAUMONT	TX	77713

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	CONSTRUCTION

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5998**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
-------------------------------------

Memo Item

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

Mailing Address 809 STAR REEF LANE

City	State	Zip Code
EDGEWATER	FL	32132

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5619**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="25.00"/>
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Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**SHEILA FRECKMANN**

Mailing Address 98 COLLEGE STREET

City	State	Zip Code
SOUTH HADLEY	MA	01075

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 467.00

**Transaction ID : SA17A.5638**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period

<input type="text" value=""/> 25.00
-------------------------------------

Memo Item

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

**MR. WILLIAM P. FREEMAN**

Mailing Address 615 C ST.

City	State	Zip Code
SAN DIEGO	CA	92101

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 378.00

**Transaction ID : SA17A.5243**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period

<input type="text" value=""/> 12.00
-------------------------------------

Memo Item

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

**JANICE GAINES**

Mailing Address 5/15 NITZA BLVD

City	State	Zip Code
NETANYA, ISRAEL		00000

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 700.00

**Transaction ID : SA17A.6026**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period

<input type="text" value=""/> 100.00
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Memo Item

**Subtotal Of Receipts This Page** (optional).....▶  137.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 33 / 208

(check only one)  
 16  17a  17b  17c  17d  18  
 19a  19b  20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**GARY GILMORE**

Mailing Address 7363 RED ROCK RD

City State Zip Code  
INDIANAPOLIS IN 46236

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ACCOUNTANT SELF EMPLOYED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4914**

Date of Receipt  
  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 2724 WOODLAND DRIVE

City State Zip Code  
ORANGE PARK FL 32073

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ALL SOULS CHURCH CHURCH ADMINISTRATOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5501**

Date of Receipt  
  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3344 GURRERO DRIVE

City State Zip Code  
VIERA FL 32940

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED TEACHERSCHOOL

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5625**

Date of Receipt  
  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**DOROTHY GLYWASKY**

Mailing Address **3344 GURRERO DRIVE**

City **VIERA** State **FL** Zip Code **32940**

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

Name of Employer **RETIRED** Occupation **RETIRED TEACHERSCHOOL**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

**Transaction ID : SA17A.5626**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 02 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00**

Memo Item

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

Mailing Address **13839 N 180TH AVE**

City **SURPRISE** State **AZ** Zip Code **85388**

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

Name of Employer **RIO MIRAGE CAFE** Occupation **VP**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **2105.00**

**Transaction ID : SA17A.5984**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

Memo Item

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

Mailing Address **591 W. CRENSHAW LN**

City **GREEN VALLEY** State **AZ** Zip Code **85614**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **325.00**

**Transaction ID : SA17A.5605**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **25.00**

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **150.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 35 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**DIANA GREVE**

Mailing Address 554 RESTORATION DR.

City State Zip Code  
MARYSVILLE OH 45638

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

Name of Employer Occupation  
EXPRESS SCRIPTS PHARMACY (ESRX) PHARMACIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
262.00

**Transaction ID : SA17A.5910**

Date of Receipt

**04 / 18 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period

52.00

Memo Item

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

**TODD GRIFFITH**

Mailing Address 2990 LONG PRAIRIE ROAD

City State Zip Code  
FLOWER MOUND TX 79912

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

Name of Employer Occupation  
GRIFFITH & COMPANY, CPA, PC CPA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1337.50

**Transaction ID : SA17A.6010**

Date of Receipt

**04 / 18 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period

125.50

Memo Item

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

**MARK GRISSOM**

Mailing Address 1012 BELLE MEADE BLVD

City State Zip Code  
NORTHPORT AL 35475

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

Name of Employer Occupation  
DEPARTMENT OF VETERANS AFFAIRS SUPERVISORY ADMINISTRATIVE OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

**Transaction ID : SA17A.5527**

Date of Receipt

**04 / 16 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period

25.00

Memo Item

**Subtotal Of Receipts This Page (optional)**.....▶ 202.50

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD GUDZ**

Mailing Address 1204 WAKELING STREET

City State Zip Code  
PHILADELPHIA PA 19152

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

Name of Employer Occupation  
PES REFINERY OPERATOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
404.00

**Transaction ID : SA17A.5417**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
18.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**DR. MARIETTA S. GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City State Zip Code  
BIRMINGHAM AL 35242

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

Name of Employer Occupation  
LIFE SAVVY WEIGHT LOSS CLINIC SEMI-RETIRED PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
352.00

**Transaction ID : SA17A.4699**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
-15.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**DR. MARIETTA S. GUEVARA**

Mailing Address 2016 GROVE PARK WAY

City State Zip Code  
BIRMINGHAM AL 35242

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

Name of Employer Occupation  
LIFE SAVVY WEIGHT LOSS CLINIC SEMI-RETIRED PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
342.00

**Transaction ID : SA17A.4704**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
-10.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **-7.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 37 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DALLAS HAMMETT**

Mailing Address 2203 SPRINGDALE

City State Zip Code  
FRANKLIN TN 37064

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
625.00

**Transaction ID : SA17A.5396**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
17.00

Memo Item

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

Mailing Address 924 CANDLEGLOW DRIVE

City State Zip Code  
GASTONIA NC 28056

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

Name of Employer Occupation  
THE POINTE CHURCH/GARDNER-WEBB LEAD PASTOR/UNIVERSITY PROFESSOR  
UNIVERS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
243.00

**Transaction ID : SA17A.5229**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
11.00

Memo Item

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

Mailing Address 436 HARVEST TERRACE DRIVE

City State Zip Code  
LAKE WYLIE SC 29710

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
697.55

**Transaction ID : SA17A.4883**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
5.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 33.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**ANN HARRIS**

Mailing Address 304 FLORIDA AVE.

City State Zip Code  
LYNN HAVEN FL 34986

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
343.00

**Transaction ID : SA17A.5487**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 21 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
22.00

Memo Item

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

Mailing Address 1540 SIR GALAHAD DR.

City State Zip Code  
MARIETTA GA 30008

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
472.25

**Transaction ID : SA17A.4871**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 11 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
5.00

Memo Item

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

Mailing Address 725 RENSCHAW STREET

City State Zip Code  
ROCHESTER MI 48307

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1200.00

**Transaction ID : SA17A.5978**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 127.00

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**CARNEY HOGAN**

Mailing Address 19408 SYMERON RD.

City	State	Zip Code
APPLE VALLEY	CA	92307

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5609**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="25.00"/>
------------------------------------

Memo Item

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

**MRS. GEORGIA HOLLIDAY**

Mailing Address 259 SAPPHIRE LAKE DRIVE

City	State	Zip Code
BRADENTON	FL	34209

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	VIRTUAL EXEC ASSISTANT/GRAPHIC ARTIST

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5694**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="25.00"/>
------------------------------------

Memo Item

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

**EDWARD HORNING**

Mailing Address 402 S. IMPERIAL AVE

City	State	Zip Code
BRAWLEY	CA	92227

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CATHOLIC DIOCESE OF SAN DIEGO	CATHOLIC PRIEST

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5855**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="50.00"/>
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Memo Item

Subtotal Of Receipts This Page (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**DEBORAH HOWARD**

Mailing Address 7191 DRY CREEK RD

City	State	Zip Code
PELL CITY	AL	35128

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ST CLAIR COUNTY	CLERK

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5700**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 6084 JOLLIFF ST

City	State	Zip Code
GALLOWAY	OH	43119

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NESTLE PURINA	SALES MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4999**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 2851 SE EAGLE DRIVE

City	State	Zip Code
PORT ST LUCIE	FL	34984

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5634**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**EDUARDO IMERY**

Mailing Address P.O. BOX 810007

City	State	Zip Code
BOCA RATON	FL	33481

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	ADMINISTRATOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5994**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MS. CHERYL BOWERS ISTVAN**

Mailing Address 1807 N. FREMONT

City	State	Zip Code
CHICAGO	IL	62260

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6008**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1208 HIGHWAY 247

City	State	Zip Code
BELTON	SC	29627

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4881**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 42 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**ERIK JOHNSON**

Mailing Address 201 SUMMIT BLVD

City State Zip Code  
CHERRY HILLS VILLAGE CO 80113

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
COLORADO AVALANCHE NHL HOCKEY PLAYER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5513**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**RAMSEY KAZEM**

Mailing Address 195 14TH STREET, NE

City State Zip Code  
ATLANTA GA 30458

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
THREE TWELVE GROUP ATTORNEY / CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5822**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**WAYNE KELLY**

Mailing Address 4511 MARINA DR.

City State Zip Code  
HOMESTEAD PA 15120

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WESTERN PA. SCHOOL FOR THE DEAF TEACHER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5723**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JONI KING**

Mailing Address 2632 PRESTWICK DR

City	State	Zip Code
ROSEVILLE	CA	95661

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

Name of Employer	Occupation
RJUHS	TEACHER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 425.00

**Transaction ID : SA17A.5674**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	25.00
-------	-------

Memo Item

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

Mailing Address 3114 HALEY POINT RD

City	State	Zip Code
ST AUGUSTINE	FL	32084

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

Name of Employer	Occupation
ISLAND DOCTORS	PHYSICIAN ASSISTANT

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 300.00

**Transaction ID : SA17A.5573**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	25.00
-------	-------

Memo Item

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

Mailing Address 14269 BEDFORD DR

City	State	Zip Code
EDEN PRAIRIE	MN	55346

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

Name of Employer	Occupation
OPTUM HEALTH	PROJECT MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 400.00

**Transaction ID : SA17A.5877**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	50.00
-------	-------

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **100.00**

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



# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**WALTER LAGRAVES**

Mailing Address 3695 TROPIC ST

City	State	Zip Code
BIG PINE KEY	FL	33043

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2015     2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

700.00

**Transaction ID : SA17A.5890**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 0.00     50.00     100.00     200.00     500.00     1000.00

Memo Item

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

Mailing Address 4326 193RD AVE SE

City	State	Zip Code
ISSAQUAH	WA	98027

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

Name of Employer	Occupation
LOZIER HOMES CORP	EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2015     2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

1350.00

**Transaction ID : SA17A.5875**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 0.00     50.00     100.00     200.00     500.00     1000.00

Memo Item

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

Mailing Address 403 HUNTLEY AVE

City	State	Zip Code
LAFAYETTE	LA	70508

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

Name of Employer	Occupation
SELF	PHYSICIAN

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2015     2016     2017     2018     2019     2020     2021     2022     2023     2024     2025     2026     2027     2028     2029     2030

202.00

**Transaction ID : SA17A.5049**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 0.00     50.00     100.00     200.00     500.00     1000.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶  0.00     107.00     200.00     500.00     1000.00

**Total This Period** (last page this line number only).....▶  0.00     107.00     200.00     500.00     1000.00

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JAMIE LEWIS**

Mailing Address **6440 GARDENIA STREET**

City	State	Zip Code
PANAMA CITY	FL	32404

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

Name of Employer INFO REQUESTED	Occupation INFO REQUESTED
------------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 619.10

**Transaction ID : SA17A.5143**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 10.00

Memo Item

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

Mailing Address **3197 HARVEST MOON DR.**

City	State	Zip Code
PALM HARBOR	FL	34683

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

Name of Employer FIS	Occupation SR. DIRECTOR
-------------------------	----------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 920.00

**Transaction ID : SA17A.5865**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 11 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. PAUL A. LIEBER**

Mailing Address **102 MEADOW COURT**

City	State	Zip Code
BELLEVUE	OH	44811

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 398.40

**Transaction ID : SA17A.5295**

Date of Receipt  

M M / D D / Y Y Y Y
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 15.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 75.00

**Total This Period** (last page this line number only).....▶ \_\_\_\_\_

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 47 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**MR. PAUL A. LIEBER**

Mailing Address 102 MEADOW COURT

City State Zip Code  
BELLEVUE OH 44811

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5470**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="20.00"/>
------------------------------------

Memo Item

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

**SUSAN LINDSEY**

Mailing Address 682 GRANT STREET

City State Zip Code  
DENVER CO 80203

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED FOR BENEFIT BIZ & INTERNET SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5402**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="17.00"/>
------------------------------------

Memo Item

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

**BENJAMIN LOPEZ**

Mailing Address 4853 SAN BERNARDINO ST

City State Zip Code  
MONTCLAIR CA 96002

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED NOTARY PUBLIC

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6012**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

<input type="text" value="127.00"/>
-------------------------------------

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA L. MANDELL**

Mailing Address 22601 Highbank Drive

City State Zip Code  
BEVERLY HILLS MI 49002

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

Name of Employer Occupation  
FISHMAN STEWART PLLC ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1337.00

**Transaction ID : SA17A.5912**

Date of Receipt  
MM / DD / YYYY  
04 / 19 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
52.00

Memo Item

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

Mailing Address 8 Undercliff Terrace

City State Zip Code  
WEST ORANGE NJ 07052

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

Name of Employer Occupation  
ATTORNEY MANDEL, KATZ & BROSANAN LLP

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
3641.00

**Transaction ID : SA17A.5950**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 302 NE 211 Terrace

City State Zip Code  
MIAMI FL 33179

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

Name of Employer Occupation  
CAD INC ARCHITECT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
331.00

**Transaction ID : SA17A.5406**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
18.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 170.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**EMMETT MANNIX**

Mailing Address 3538 DIVOT DR.

City State Zip Code  
MAIDEN NC 28803

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
219.00

**Transaction ID : SA17A.5113**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
9.00

Memo Item

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

Mailing Address 6808 LINDAL ROAD

City State Zip Code  
KNOXVILLE TN 37931

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

Name of Employer Occupation  
FORT SANDERS REGIONAL MEDICAL CENTER CT TECHNOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
205.00

**Transaction ID : SA17A.4818**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
5.00

Memo Item

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

Mailing Address 312 E. KINGS HWY

City State Zip Code  
SHREVEPORT LA 70508

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

Name of Employer Occupation  
VOICEOVER ARTIST SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
206.00

**Transaction ID : SA17A.5938**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
76.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 90.00

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**FRANCES MARTINEZ MYERS**

Mailing Address **5003 JOSHUA THOMAS RD**

City **CRISFIELD** State **MD** Zip Code **21817**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**254.00**

**Transaction ID : SA17A.5391**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**17.00**

Memo Item

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

Mailing Address **36 SHIRLEY TER**

City **ROCHESTER** State **NY** Zip Code **14626**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**359.00**

**Transaction ID : SA17A.5191**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 01 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**10.00**

Memo Item

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

Mailing Address **1022 DELF DRIVE**

City **MCLEAN** State **VA** Zip Code **22101**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**455.00**

**Transaction ID : SA17A.5816**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**35.00**

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **62.00**

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

PAGE 51 / 208

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**RICHARD TRENT MCCOTTER**

Mailing Address 443 NEW YORK AVE NW

City	State	Zip Code
WASHINGTON	DC	20024

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

Name of Employer	Occupation
INFO REQUESTED	INFO REQUESTED

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

341.50

**Transaction ID : SA17A.5788**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

32.00

Memo Item

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

**DEBORAH MCDUFFEY**

Mailing Address 760 QUARRY ROAD

City	State	Zip Code
SIDNEY	NY	13838

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

Name of Employer	Occupation
AMERICAN BLUESTONE LLC	SELF-EMPLOYED

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

**Transaction ID : SA17A.5946**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

100.00

Memo Item

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

**DAVID MCFARLAND**

Mailing Address 75072 GLENEAGLES CIRCLE

City	State	Zip Code
INDIAN WELLS	CA	92210

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

707.00

**Transaction ID : SA17A.5883**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

50.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **182.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 52 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL MCLEOD**

Mailing Address 39 STOCKWOOD ROAD EXT. ASHEVILLE

City State Zip Code  
NORTH CAROLINA NC 28803

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NONE ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

**Transaction ID : SA17A.5003**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 9841 NW 51ST LANE

City State Zip Code  
DORAL FL 33178

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MCMULLEN ENVIRONMENTAL CONSULTING LLC ENVIRONMENTAL SCIENTIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

**Transaction ID : SA17A.4850**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 725 WATER OAK DR.

City State Zip Code  
SEYMOUR TN 37865

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

**Transaction ID : SA17A.4885**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**18000.00**

**Transaction ID : SA17A.4654**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			30			2016			

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**15300.00**

**Transaction ID : SA17A.4655**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			30			2016			

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**12600.00**

**Transaction ID : SA17A.4656**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			30			2016			

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **-8100.00**

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**9900.00**

**Transaction ID : SA17A.4657**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 30 / 2016**

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**7200.00**

**Transaction ID : SA17A.4658**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 30 / 2016**

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address **273 AZALEA RD,1502**  
**STE 1-502**

City **MOBILE** State **AL** Zip Code **36609**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**4500.00**

**Transaction ID : SA17A.4659**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 30 / 2016**

**CHARGED BACK**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **-8100.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 55 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT A. MEISLER**

Mailing Address 273 AZALEA RD,1502  
STE 1-502

City MOBILE State AL Zip Code 36609

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4662**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2016

CHARGED BACK

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 21105 CARDINAL POND TER  
APT 114

City ASHBURN State VA Zip Code 20147

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5224**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address P O BOX 2232

City POULSBO State WA Zip Code 98370

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5936**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**LEE MICKUS**

Mailing Address 9168 BUCK HILL DR.

City	State	Zip Code
HIGHLANDS RANCH	CO	80126

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SNELL & WILMER L.L.P.	ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5698**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 350 G ST SW N313

City	State	Zip Code
WASHINGTON	DC	20024

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ARCHITECT OF THE CAPITOL	ADMINISTRATIVE OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5948**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3 RIDGESTONE DR.

City	State	Zip Code
HENDERSONVILLE	NC	28792

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5647**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 57 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MALINDA MOOR**

Mailing Address 5815 JOYCE WAY

City State Zip Code  
DALLAS TX 79912

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INVESTOR SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4793**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 7609 TALLY ANN DRIVE

City State Zip Code  
TALLAHASSEE FL 32311

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DIOCESE OF PENSACOLA-TALLAHASSEE BUSINESS MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5529**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EMMET O'NEAL**

Mailing Address 3412 TENNESSEE DRIVE

City State Zip Code  
ALEXANDRIA VA 24018

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
UNIVERSITY OF ALABAMA STUDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5925**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**BOB OBRINGER**

Mailing Address 61 BALSAM RD.

City State Zip Code  
WAYNE NJ 07470

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
765.00

**Transaction ID : SA17A.5561**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 61 BALSAM RD.

City State Zip Code  
WAYNE NJ 07470

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
790.00

**Transaction ID : SA17A.5562**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 6833 ANCHORAGE LANE

City State Zip Code  
HIXSON TN 37343

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

Name of Employer Occupation  
WESTINGHOUSE ELECTRIC LLC VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
512.50

**Transaction ID : SA17A.5725**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 75.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MIKE OPPENHEIM**

Mailing Address 2146 PRAIRIE AVE

City State Zip Code  
MIAMI BEACH FL 33139

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

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1025.00

**Transaction ID : SA17A.5992**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 2016 MARYAL

City State Zip Code  
SACRAMENTO CA 95864

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

Name of Employer Occupation  
SELF MARKETING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
320.00

**Transaction ID : SA17A.5678**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 17 BEACH RD

City State Zip Code  
BARRINGTON RI 02865

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

Name of Employer Occupation  
RI DEPARTMENT OF EDUCATION CHIEF OF ACCELERATING SCHOOL PERFORMANCE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
407.00

**Transaction ID : SA17A.5781**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 19 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
31.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 156.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK PALANK**

Mailing Address 1674 S. AVENUE B

City State Zip Code  
YUMA AZ 85364

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
510.00

**Transaction ID : SA17A.5601**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address INFO REQUESTED

City State Zip Code  
REQUESTED

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
27.00

**Transaction ID : SA17A.4661**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 30 / 2016

CHARGED BACK

Amount of Each Receipt this Period  
-2673.00

Memo Item

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

Mailing Address 1105 E SEWELL

City State Zip Code  
SUNDANCE WY 82729

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

Name of Employer Occupation  
BLACK IRON GUNS SOCIAL MEDIA MARKETER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
245.00

**Transaction ID : SA17A.5447**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
20.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ **-2628.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 61 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MARC PELTA**

Mailing Address 267 TERESITA BLVD

City State Zip Code  
SAN FRANCISCO CA 96002

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
225.25

**Transaction ID : SA17A.6021**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 04 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
225.25

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES ROE PENROSE**

Mailing Address 1744

City State Zip Code  
BAKERSFIELD CA 93306

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

Name of Employer Occupation  
KAISER PERMANENTE PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
285.00

**Transaction ID : SA17A.5575**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 17 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 5476 E. FERNAN HILL ROAD

City State Zip Code  
COEUR D ALENE ID 83814

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1019.00

**Transaction ID : SA17A.5465**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
20.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 270.25

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**JUAN PEREZ CARRION**

Mailing Address 253 NE 2 ST

City	State	Zip Code
MIAMI	FL	33132

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
AUCTION DEAL FLORIDA LLC	PRESIDENT

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5366**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**TONI PERKINS**

Mailing Address 8000 33RD AVE N

City	State	Zip Code
ST. PETERSBURG	FL	33710

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DANE CONSTRUCTION	ADMIN ASSISTANT

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4814**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**TONI PERKINS**

Mailing Address 8000 33RD AVE N

City	State	Zip Code
ST. PETERSBURG	FL	33710

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DANE CONSTRUCTION	ADMIN ASSISTANT

Receipt For: 2016

Primary     General

Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5260**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**CAROL PFAFF**

Mailing Address 305 S. CHAPMAN ST.

City Greensboro State NC Zip Code 27403

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

Name of Employer Occupation  
GUILFORD COUNTY SCHOOLS TEACHER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
513.00

**Transaction ID : SA17A.4950**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 305 S. CHAPMAN ST.

City Greensboro State NC Zip Code 27403

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

Name of Employer Occupation  
GUILFORD COUNTY SCHOOLS TEACHER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
538.00

**Transaction ID : SA17A.5539**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 204 SAVONA WAY

City NOKOMIS State FL Zip Code 34275

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.5632**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 57.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**MOLLY PINCKNEY**

Mailing Address 2204 E. DEVONSHIRE AVE

City State Zip Code  
PHOENIX AZ 85016

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

Name of Employer Occupation  
MOLLY PLANTS LLC HORTICULTURIST/DESIGNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

**Transaction ID : SA17A.5583**

Date of Receipt

M  M /  D  D /  Y  Y  Y  Y  
04 16 2016

PRIMARY DEBT

Amount of Each Receipt this Period

25.00

Memo Item

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

**MARK PINKERTON**

Mailing Address 10680 S CEDAR NILES BLVD

City State Zip Code  
OLATHE KS 66061

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

Name of Employer Occupation  
SELF-EMPLOYED M.D.

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
386.00

**Transaction ID : SA17A.5245**

Date of Receipt

M  M /  D  D /  Y  Y  Y  Y  
04 16 2016

PRIMARY DEBT

Amount of Each Receipt this Period

12.00

Memo Item

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

**CHRISTINA PITTMAN**

Mailing Address 4417 STANFORD

City State Zip Code  
DALLAS TX 79912

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

Name of Employer Occupation  
PITTMAN&HARRISON PLLC MOTHER/ATTORNEY INACTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
631.00

**Transaction ID : SA17A.5756**

Date of Receipt

M  M /  D  D /  Y  Y  Y  Y  
04 18 2016

PRIMARY DEBT

Amount of Each Receipt this Period

29.00

Memo Item

Subtotal Of Receipts This Page (optional)..... **66.00**

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JOANN Pocher**

Mailing Address **97257 PIRATES WAY**

City **YULEE** State **FL** Zip Code **32097**

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

Name of Employer **STUDENT** Occupation **STUDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**250.00**

**Transaction ID : SA17A.5704**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			09			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address **97257 PIRATES WAY**

City **YULEE** State **FL** Zip Code **32097**

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

Name of Employer **STUDENT** Occupation **STUDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**275.00**

**Transaction ID : SA17A.5705**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			09			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address **4621 TERESATRL**

City **MIDLOTHIAN** State **TX** Zip Code **76065**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**450.00**

**Transaction ID : SA17A.5662**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **75.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**SALLY POOL**

Mailing Address 102 DAWN CIRCLE

City	State	Zip Code
WEATHERFORD	TX	76086

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	NONE

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5664**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 12310 ESCADA DRIVE

City	State	Zip Code
CHESTERFIELD	VA	24018

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5920**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			20			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1102 HUNTERS GLEN DRIVE

City	State	Zip Code
WOODSTOCK	GA	30189

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CHC	MARKETING

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5845**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			16			2016			

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**EUGENIO RAPOSO**

Mailing Address 335 S BISCAYNE BLVD APT 2900

City	State	Zip Code
MIAMI	FL	33131

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MIAMI DADE COUNTY	CM3

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4988**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address P.O. BOX 21038

City	State	Zip Code
ANAKTUVUK PASS	AK	99721

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SECRETARY	NORTH SLOPE BOROUGH SCHOOL DISTRICT

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5299**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 6826 24TH ST N

City	State	Zip Code
SAINT CLOUD	MN	56515

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ST CLOUD HOSPITAL	PSYCHOLOGIST

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5702**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MARIA RICCARDI**

Mailing Address 6826 24TH ST N

City	State	Zip Code
SAINT CLOUD	MN	56515

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

Name of Employer	Occupation
ST CLOUD HOSPITAL	PSYCHOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
498.00

**Transaction ID : SA17A.5782**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
31.00

Memo Item

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

Mailing Address 31/49 MOO 13 NONGPRUE

City	State	Zip Code
BANGLAMUNG	CA	20260

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
319.00

**Transaction ID : SA17A.5607**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MR. BERNARDO J. RICO**

Mailing Address 7704 GRANADA DRIVE

City	State	Zip Code
BETHESDA	MD	21817

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

Name of Employer	Occupation
IFC	BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1895.00

**Transaction ID : SA17A.5547**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 10 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

Subtotal Of Receipts This Page (optional)..... 81.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KEN ROBERTS**

Mailing Address 520 YELLOWSTONE DR.

City State Zip Code  
VACAVILLE CA 95687

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
595.00

**Transaction ID : SA17A.5139**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 520 YELLOWSTONE DR.

City State Zip Code  
VACAVILLE CA 95687

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
645.00

**Transaction ID : SA17A.5884**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 44 SACAJAWEA AVE

City State Zip Code  
LANDER WY 82520

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

Name of Employer Occupation  
WYOMING CATHOLIC COLLEGE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
680.00

**Transaction ID : SA17A.5906**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
50.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 110.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JORGE RODRIGUEZ**

Mailing Address **6312 LOMA DE CRISTO**

City **EL PASO** State **TX** Zip Code **79912**

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

Name of Employer **EL PASO FIRE DEPARTMENT** Occupation **FIREFIGHTER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**550.00**

**Transaction ID : SA17A.5531**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									25.00

Memo Item

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

Mailing Address **6312 LOMA DE CRISTO**

City **EL PASO** State **TX** Zip Code **79912**

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

Name of Employer **EL PASO FIRE DEPARTMENT** Occupation **FIREFIGHTER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**575.00**

**Transaction ID : SA17A.5532**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									25.00

Memo Item

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

Mailing Address **9121SW 8TEE**

City **MIAMI** State **FL** Zip Code **33155**

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

Name of Employer **GOYA** Occupation **VENDOR**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**508.16**

**Transaction ID : SA17A.4948**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  

									7.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 

									57.00
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**Total This Period** (last page this line number only).....▶ 

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# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 71 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**PABLO RODRIGUEZ**

Mailing Address 9121SW 8TEE

City	State	Zip Code
MIAMI	FL	33155

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

Name of Employer	Occupation
GOYA	VENDOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 519.16

**Transaction ID : SA17A.5214**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	11.00
-------	-------

Memo Item

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

**DONNA ROGERS**

Mailing Address 407 SYCAMORE ST.

City	State	Zip Code
STARKVILLE	MS	39759

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

Name of Employer	Occupation
MSU	RADIATION SAFETY OFFICER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 255.16

**Transaction ID : SA17A.5163**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	10.00
-------	-------

Memo Item

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

**DAGOBERTO RUIZ**

Mailing Address 1128 ATRISCO NW

City	State	Zip Code
ALBUQUERQUE	NM	87105

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 275.00

**Transaction ID : SA17A.5653**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	25.00
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Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 

_____	46.00
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**Total This Period** (last page this line number only).....▶ 

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# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**ANTHONY RUSSO**

Mailing Address 16 ANCHOR CT

City	State	Zip Code
WEST BABYLON	NY	11704

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5996**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 202 RUSSELL ROAD

City	State	Zip Code
ALEXANDRIA	VA	22301

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5199**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 10253 MISERY PT. RD NW

City	State	Zip Code
SEABECK	WA	98380

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5896**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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



# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JERRY SANSOM**

Mailing Address **P.O. BOX 98**

City **COCOA** State **FL** Zip Code **32923**

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

Name of Employer **SELF** Occupation **GOVT. RELATIONS**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

**Transaction ID : SA17A.5986**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**100.00**

Memo Item

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

Mailing Address **60 PARK AVE**

City **MAYWOOD** State **NJ** Zip Code **07607**

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

Name of Employer **NE LASER VEIN INSTITUTE** Occupation **OFFICE MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **325.00**

**Transaction ID : SA17A.4996**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **60 PARK AVE**

City **MAYWOOD** State **NJ** Zip Code **07607**

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

Name of Employer **NE LASER VEIN INSTITUTE** Occupation **OFFICE MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **332.00**

**Transaction ID : SA17A.4997**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**7.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **114.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KATHY SAVICH**

Mailing Address 300 3RD ST NE #201

City State Zip Code  
WASHINGTON DC 20024

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

Name of Employer Occupation  
DOCA LLC REALTIME COURT REPORTER/STENOGRAPHER

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date **2000.00**

**Transaction ID : SA17A.6019**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 02 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**200.00**

Memo Item

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

Mailing Address 1000 MAYFLOWER DR.

City State Zip Code  
NEWARK DE 19702

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

Name of Employer Occupation  
CISCO SYSTEMS ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date **491.50**

**Transaction ID : SA17A.6016**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 18 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**146.50**

Memo Item

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

Mailing Address 230 OCKLAWAHA RD

City State Zip Code  
WEWAHITCHKA FL 32465

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)   
Election Cycle-to-Date **468.00**

**Transaction ID : SA17A.5742**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 16 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**27.00**

Memo Item

Subtotal Of Receipts This Page (optional)..... **373.50**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MR. VINCENT SEBASTIANO**

Mailing Address **66 MAPLE LANE**

City **MOUNT ARLINGTON** State **NJ** Zip Code **07856**

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

Name of Employer **RAILS STEAKHOUSE** Occupation **BARTENDER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**1441.00**

**Transaction ID : SA17A.5595**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address **4429 AVE ISLA VERDE APT 1002**

City **CAROLINA** State **PR** Zip Code **00979**

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

Name of Employer **MEDICAL CODER** Occupation **ARROHEALTH**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**248.00**

**Transaction ID : SA17A.4982**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**7.00**

Memo Item

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

Mailing Address **225 CANNON COURT EAST**

City **PONTE VEDRA BEACH** State **FL** Zip Code **32082**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**790.16**

**Transaction ID : SA17A.5617**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **57.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**LARRY SMITH**

Mailing Address 1241 NW LAWRIDGE AVE

City State Zip Code  
GRANTS PASS OR 97526

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

Name of Employer Occupation  
ELDER CARE SELF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
213.00

**Transaction ID : SA17A.4934**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address P.O. BOX 1128

City State Zip Code  
SILVERTON OR 97381

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

Name of Employer Occupation  
CHASE MORTGAGE LOAN OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
375.00

**Transaction ID : SA17A.5511**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 9904 LINGO LANE

City State Zip Code  
DALLAS TX 75228

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
325.00

**Transaction ID : SA17A.5658**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 57.00

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 77 / 208

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**THOMAS SOUTHERN**

Mailing Address **ONE STORYTELLING ROCK ROAD**

City	State	Zip Code
WOLFEBORO	NH	03894

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 235.00

**Transaction ID : SA17A.5649**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	25.00
-------	-------

Memo Item

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

**JIM SPENCER**

Mailing Address **4810 COPPEDGE TRAIL**

City	State	Zip Code
PEACHTREE CORNERS	GA	30096

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

Name of Employer	Occupation
IMAGINE ADVERTISING	VP IT

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 375.00

**Transaction ID : SA17A.5549**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	25.00
-------	-------

Memo Item

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

**MR. JAMES R. SPILLER**

Mailing Address **880 NEW JERSEY AVE SE  
APARTMENT 208**

City	State	Zip Code
WASHINGTON	DC	20024

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

Name of Employer	Occupation
RICOCHET	ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1583.00

**Transaction ID : SA17A.5421**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	9		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

_____	18.00
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Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 

_____	68.00
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**Total This Period** (last page this line number only).....▶ 

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**SCHEDULE A-P**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

16    17a    17b    17c    17d    18  
 19a    19b    20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**DIANNE STEFFEY**

Mailing Address 226 BLUFF HOLLOW

City State Zip Code  
SAN ANTONIO TX 78216

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DO NOT DISCLOSE EMPLOYED

Receipt For: 2016  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.5861**

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 142 PENNY LANE

City State Zip Code  
GEORGETOWN TX 78633

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INTERNET SERVICE PROVIDER SOS COMMUNICATIONS LLC

Receipt For: 2016  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1035.00

**Transaction ID : SA17A.5571**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 226 OLD EAGLE SCHOOL ROAD

City State Zip Code  
STRAFFORD PA 19087

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
COMMUNITY ASSOCIATION UNDERWRITERS OF CONTROLLER

Receipt For: 2016  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1355.00

**Transaction ID : SA17A.5515**

Date of Receipt  
MM / DD / YYYY  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 100.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MARY STOVER**

Mailing Address **61 E WATER STREET**

City **SMITHSBURG** State **MD** Zip Code **21783**

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

Name of Employer **FIRST DATA** Occupation **RESEARCH**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

**Transaction ID : SA17A.5534**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address **2688 COVE VIEW DRIVE**

City **JACKSONVILLE** State **FL** Zip Code **34986**

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

Name of Employer **CUSTOM PUMP & CONTROLS** Occupation **BUSINESS OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **947.00**

**Transaction ID : SA17A.5231**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**12.00**

Memo Item

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

Mailing Address **7281 KRACH CT**

City **LIBERTY TOWNSHIP** State **OH** Zip Code **45044**

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

Name of Employer **SELF EMPLOYED** Occupation **FUNDRAISING**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ **235.00**

**Transaction ID : SA17A.5690**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 16 / 2016**

**PRIMARY DEBT**

Amount of Each Receipt this Period  
**25.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **62.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MS TERRY L. SUCHMAN**

Mailing Address 146 KATIE LN

City State Zip Code  
FOLEY MO 63347

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
229.00

**Transaction ID : SA17A.4960**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 42 GLEN ST

City State Zip Code  
WESTBOROUGH MA 01581

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
275.00

**Transaction ID : SA17A.5644**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 2633 S. KINGS ROAD

City State Zip Code  
VIRGINIA BEACH VA 23452

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
425.00

**Transaction ID : SA17A.5666**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 03 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 57.00

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



# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN TEAGUE**

Mailing Address 1517 N. HIGHWAY 174

City RIO VISTA State TX Zip Code 76093

FEC ID number of contributing federal political committee.

Name of Employer GULFTEX Occupation CIVIL ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5954**

Date of Receipt  
 /  /

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 411 YORKSHIRE AVE.

City PASADENA State TX Zip Code 79912

FEC ID number of contributing federal political committee.

Name of Employer TEACHER Occupation DEER PARK INDEPENDENT SCHOOL DISTRICT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5736**

Date of Receipt  
 /  /

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3012 LAURIE LANE

City EDINBURG State TX Zip Code 78539

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6000**

Date of Receipt  
 /  /

**PRIMARY DEBT**

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JULIA THOMPSON**

Mailing Address 405 WEST MISSION STREET

City State Zip Code  
STRAWBERRY POINT IA 52076

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

Name of Employer Occupation  
SELF OWNER, RETAIL STORE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ **875.00**

**Transaction ID : SA17A.5680**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 02 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address 405 WEST MISSION STREET

City State Zip Code  
STRAWBERRY POINT IA 52076

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

Name of Employer Occupation  
SELF OWNER, RETAIL STORE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ **900.00**

**Transaction ID : SA17A.5681**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 13 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**25.00**

Memo Item

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

Mailing Address 405 WEST MISSION STREET

City State Zip Code  
STRAWBERRY POINT IA 52076

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

Name of Employer Occupation  
SELF OWNER, RETAIL STORE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ **925.00**

**Transaction ID : SA17A.5682**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 13 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**25.00**

Memo Item

**Subtotal Of Receipts This Page** (optional)..... **75.00**

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**JULIA THOMPSON**

Mailing Address 405 WEST MISSION STREET

City	State	Zip Code
STRAWBERRY POINT	IA	52076

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	OWNER, RETAIL STORE

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="950.00"/>

**Transaction ID : SA17A.5683**

Date of Receipt  
 /  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 405 WEST MISSION STREET

City	State	Zip Code
STRAWBERRY POINT	IA	52076

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	OWNER, RETAIL STORE

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="975.00"/>

**Transaction ID : SA17A.5684**

Date of Receipt  
 /  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 4430 SW 97 AVE

City	State	Zip Code
MIAMI	FL	33165

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
N/A	RETIRADA

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="201.00"/>

**Transaction ID : SA17A.4990**

Date of Receipt  
 /  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page (optional)** .....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**TERESA TIRADO**

Mailing Address 4430 SW 97 AVE

City State Zip Code  
MIAMI FL 33165

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
N/A RETIRADA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5287**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**GARY TOMS**

Mailing Address 111 SOUTH HAVILAND AVENUE

City State Zip Code  
AUDUBON NJ 08106

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5393**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

**ANA TONEY**

Mailing Address P.O. BOX 116

City State Zip Code  
SUMMERVILLE SC 29484

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5568**

Date of Receipt

/  /

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**ANA TONEY**

Mailing Address P.O. BOX 116

City State Zip Code  
SUMMERVILLE SC 29484

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

Name of Employer Occupation  
INFO REQUESTED INFO REQUESTED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.5569**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 1117 MOUNTAIN OAKS DR.

City State Zip Code  
BIRMINGHAM AL 35226

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

Name of Employer Occupation  
CONSTANGY ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
425.16

**Transaction ID : SA17A.4926**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 2205 GISBOURNE DRIVE

City State Zip Code  
FLOWER MOUND TX 75028

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

Name of Employer Occupation  
SELF-EMPLOYED CREATIVE DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
929.00

**Transaction ID : SA17A.5902**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
50.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 82.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARSHA S. TUTTLE**

Mailing Address 994 MALAKOFF RD

City State Zip Code  
SAN DIMAS CA 96002

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6014**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 780 S FLORIDA AVE

City State Zip Code  
TARPON SPRINGS FL 34689

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
3T-INNOVATIONS PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5944**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1105 TIMBERLANE RD

City State Zip Code  
CHIPLEY FL 32428

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED OWNER DAIRY FARMER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5692**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**BURT VINCENT**

Mailing Address 700 SOUTH HARBOUR ISLAND BLVD UNIT

City	State	Zip Code
TAMPA	FL	33602

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5892**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 3647 IREDELL AVE

City	State	Zip Code
ROANOKE	VA	24018

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
TCM	SUPERVISOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5076**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 2846 ROSARIO DRIVE

City	State	Zip Code
SAN JOSE	CA	95132

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4863**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**ANN WAY**

Mailing Address 306 WEST WALL, STE. 410

City	State	Zip Code
MIDLAND	TX	79701

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
N/A	HOMEMAKER

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2700.00"/>
<input type="checkbox"/> Other (specify) ▼	

**Transaction ID : SA17A.6119**

Date of Receipt

M M / D D / Y Y Y Y
04 / 19 / 2016

REATTRIBUTION FROM RALPH WAY (ORIG 2/29/16)

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 306 WEST WALL STE. 410

City	State	Zip Code
MIDLAND	TX	79701

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF	OIL & GAS

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2700.00"/>
<input type="checkbox"/> Other (specify) ▼	

**Transaction ID : SA17A.6117**

Date of Receipt

M M / D D / Y Y Y Y
04 / 19 / 2016

REATTRIBUTION TO ANN WAY (ORIG 2/29/16)

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 5201 MEMORIAL DR

City	State	Zip Code
HOUSTON	TX	77007

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
OCEANEERING	PROJECT MANAGER

Receipt For: 2016	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1135.00"/>
<input type="checkbox"/> Other (specify) ▼	

**Transaction ID : SA17A.4668**

Date of Receipt

M M / D D / Y Y Y Y
04 / 16 / 2016

CHARGED BACK

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**ELAINE WEBSTER**

Mailing Address 1105 N LUPINE ST

City State Zip Code  
LOMPOC CA 93436

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

Name of Employer Occupation  
AYR MINISTRIES PASTOR/DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
351.00

**Transaction ID : SA17A.4920**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 1105 N LUPINE ST

City State Zip Code  
LOMPOC CA 93436

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

Name of Employer Occupation  
AYR MINISTRIES PASTOR/DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
361.00

**Transaction ID : SA17A.5120**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
10.00

Memo Item

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

Mailing Address 3981 TROUGH SPRINGS ROAD

City State Zip Code  
ADAMS TN 37010

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

Name of Employer Occupation  
SELF EMPLOYED RETAIL- CLOTHING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
525.00

**Transaction ID : SA17A.5990**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 01 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

Subtotal Of Receipts This Page (optional).....▶ 117.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**CONSTANCE WHITE**

Mailing Address 133 ATSION RD

City	State	Zip Code
MEDFORD LAKES	NJ	08055

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5651**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1401 WOODFORD ROAD

City	State	Zip Code
LEWISVILLE	NC	27023

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUMMIT CU	MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5074**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

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

Mailing Address 1257 PRATT RD

City	State	Zip Code
TALBOTT	TN	38316

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RENNER ELECTRIC HEATING AND COOLING I	MARKETING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6006**

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

PRIMARY DEBT

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**MARCO RUBIO FOR PRESIDENT**

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

**HARRISON WINTERING**

Mailing Address P.O. BOX 44354

City	State	Zip Code
PHOENIX	AZ	85614

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

Name of Employer	Occupation
DISCOUNT TIRE	CREW CHEIF

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 547.00

**Transaction ID : SA17A.5235**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	8		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 12.00

Memo Item

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

**THOMAS WOODS**

Mailing Address 1630 JOHN ST

City	State	Zip Code
PORTAGE	MI	49002

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 394.00

**Transaction ID : SA17A.4879**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5.00

Memo Item

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

**TINA WURSCHMIDT**

Mailing Address 40 PIUS STREET

City	State	Zip Code
PITTSBURGH	PA	15203

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

Name of Employer	Occupation
SHEPHERD'S HEART FELLOWSHIP	MUSIC PASTOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 325.00

**Transaction ID : SA17A.5696**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	1	6

PRIMARY DEBT

Amount of Each Receipt this Period  
 \_\_\_\_\_ 25.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 42.00

**Total This Period** (last page this line number only).....▶ \_\_\_\_\_

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**KALLIE YATES**

Mailing Address 491 HICKOK RD

City State Zip Code  
LYNCHBURG VA 24018

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

Name of Employer Occupation  
STUDENT NA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
311.05

**Transaction ID : SA17A.5707**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

Memo Item

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

Mailing Address 213 GOLDEN POND DRIVE

City State Zip Code  
MADISON MS 39110

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

Name of Employer Occupation  
WESLEY BIBLICAL SEMINARY; JACKSON, MS PROFESSOR/MUSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3905.00

**Transaction ID : SA17A.6004**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
100.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MS. MELISSA ANN YOUNG**

Mailing Address 27 EDNAM VILLAGE STREET

City State Zip Code  
CHARLOTTESVILLE VA 24018

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

Name of Employer Occupation  
JOSEPH & ROBERT CORNELL MEMORIAL FOUND. NONPROFIT MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
423.50

**Transaction ID : SA17A.5835**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
40.00

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 165.00

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

SCHEDULE A-P  
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL YOUNG**

Mailing Address **2339 OVERLOOK CT.**

City	State	Zip Code
<b>NAPERVILLE</b>	<b>IL</b>	<b>60563</b>

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

Name of Employer	Occupation
<b>CLOUDONE</b>	<b>CLOUD COMPUTING</b>

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**650.00**

Transaction ID : **SA17A.5859**

Date of Receipt  
MM / DD / YYYY  
**04 / 16 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**50.00**

Memo Item

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

Mailing Address **3924 RASPBERRY RIDGE ROAD NW**

City	State	Zip Code
<b>PRIOR LAKE</b>	<b>MN</b>	<b>56515</b>

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

Name of Employer	Occupation
<b>NORTHFIELD LINES, INC.</b>	<b>PROFESSIONAL MOTORCOACH DRIVER</b>

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**203.00**

Transaction ID : **SA17A.5839**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**40.00**

Memo Item

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

Mailing Address **839 KITTY HAWK LN**

City	State	Zip Code
<b>GRAND PRAIRIE</b>	<b>TX</b>	<b>75051</b>

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

Name of Employer	Occupation
<b>VINDALE RESEARCH</b>	<b>SURVEYS</b>

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**361.00**

Transaction ID : **SA17A.5084**

Date of Receipt  
MM / DD / YYYY  
**04 / 16 / 2016**

PRIMARY DEBT

Amount of Each Receipt this Period  
**7.00**

Memo Item

Subtotal Of Receipts This Page (optional)..... **97.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 94 / 208

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP ZACHARIAS**

Mailing Address 839 KITTY HAWK LN

City State Zip Code  
GRAND PRAIRIE TX 75051

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

Name of Employer Occupation  
VINDALE RESEARCH SURVEYS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
368.00

**Transaction ID : SA17A.5085**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
7.00

Memo Item

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

Mailing Address 2505 BUTTONWOOD RUN

City State Zip Code  
THE VILLAGES FL 32162

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
460.00

**Transaction ID : SA17A.5623**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 16 / 2016

PRIMARY DEBT

Amount of Each Receipt this Period  
25.00

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 32.00

**Total This Period** (last page this line number only).....▶ -12935.00

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**AMAZON.COM**

Mailing Address **1200 12TH AVE.**  
**STE. 1200**

City **SEATTLE** State **WA** Zip Code **98144**

FEC ID number of contributing federal political committee.

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA20A.4634**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			11			2016			

SALE OF ASSET

Amount of Each Receipt this Period

Memo Item

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

Mailing Address **1200 12TH AVE.**  
**STE. 1200**

City **SEATTLE** State **WA** Zip Code **98144**

FEC ID number of contributing federal political committee.

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA20A.4636**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			25			2016			

SALE OF ASSET

Amount of Each Receipt this Period

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**BB&T FINANCIAL SERVICES**

Mailing Address **P.O. BOX 24747**

City **TAMPA** State **FL** Zip Code **33623**

FEC ID number of contributing federal political committee.

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA20A.6107**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
04			30			2016			

VENDOR REFUND-CC OVERPAYMENT

Amount of Each Receipt this Period

Memo Item

**Subtotal Of Receipts This Page (optional)**.....

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**The Godwin Group LLC**

Mailing Address PO Box 856

City	State	Zip Code
Ankeny	IA	50021

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA20A.6035**

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

Vendor Refund

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / 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.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / 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).....



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address 1909 K St., NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
271824.27

**Transaction ID : SA21.4633**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 29 / 2016

INTEREST INCOME

Amount of Each Receipt this Period  
968.25

Memo Item

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

Mailing Address 117 N. ST. ASAPH ST.

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
56487.31

**Transaction ID : SA21.4629**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

LIST RENTAL INCOME

Amount of Each Receipt this Period  
56487.31

Memo Item

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

Mailing Address 117 N. ST. ASAPH ST.

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
57019.95

**Transaction ID : SA21.4631**

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2016

LIST RENTAL INCOME

Amount of Each Receipt this Period  
532.64

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 57988.20

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

### MARCO RUBIO FOR PRESIDENT

**A.** Full Name (Last, First, Middle Initial)  
**CAMPAIGN SOLUTIONS**

Mailing Address 117 N. ST. ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
74866.23

**Transaction ID : SA21.4632**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	1	6

**LIST RENTAL INCOME**

Amount of Each Receipt this Period

1	7	8	4	6	.	2	8
---	---	---	---	---	---	---	---

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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	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) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

--	--	--	--	--	--	--	--

Memo Item

**Subtotal Of Receipts This Page** (optional).....▶ 

1	7	8	4	6	.	2	8
---	---	---	---	---	---	---	---

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

7	5	8	3	4	.	4	8
---	---	---	---	---	---	---	---

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 99 / 208

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. ACS SOUND AND LIGHTING</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 110 LOTT CT		<b>Transaction ID : SB23.4141</b>
City WEST COLUMBIA	State SC	
Purpose of Disbursement EVENT EQUIPMENT RENTAL		Amount of Each Disbursement this Period 5508.36
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. JEREMY ADLER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4240</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY		Amount of Each Disbursement this Period 638.38
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. MATTHEW ALBERS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4242</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY		Amount of Each Disbursement this Period 591.71
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

**Subtotal Of Receipts This Page** (optional)..... 6738.45

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. ALSTON AND BIRD</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address PO BOX 933124		<b>Transaction ID : SB23.4143</b>
City ATLANTA      State GA      Zip Code 31193	Amount of Each Disbursement this Period 797.38	
Purpose of Disbursement CATERING	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:      District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS-MERCHANT</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address P.O. BOX 1270		<b>Transaction ID : SB23.4145</b>
City NEWARK      State NJ      Zip Code 07101	Amount of Each Disbursement this Period 7.95	
Purpose of Disbursement MERCHANT FEES	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:      District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS-MERCHANT</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address P.O. BOX 1270		<b>Transaction ID : SB23.4146</b>
City NEWARK      State NJ      Zip Code 07101	Amount of Each Disbursement this Period 7.95	
Purpose of Disbursement MERCHANT FEES	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:      District:		

Subtotal Of Receipts This Page (optional)..... 813.28

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS-MERCHANT</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address P.O. BOX 1270		Transaction ID : <b>SB23.4147</b>
City <b>NEWARK</b>	State <b>NJ</b>	
Zip Code <b>07101</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	Amount of Each Disbursement this Period 1.60
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS-MERCHANT</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address P.O. BOX 1270		Transaction ID : <b>SB23.4148</b>
City <b>NEWARK</b>	State <b>NJ</b>	
Zip Code <b>07101</b>	Purpose of Disbursement <b>MERCHANT FEES</b>	Amount of Each Disbursement this Period 51.10
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SHANE ARCHAMBAULT</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 45 GEORGE STREET #6		Transaction ID : <b>SB23.4244</b>
City <b>BIDDEFORD</b>	State <b>ME</b>	
Zip Code <b>04005</b>	Purpose of Disbursement <b>SALARY</b>	Amount of Each Disbursement this Period 556.23
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 608.93

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL ARENS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4246</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 672.44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JUSTIN ARNOLD</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 2330 NW 71ST PL.		<b>Transaction ID : SB23.4248</b>
City ANKENY	State IA	
Purpose of Disbursement PER DIEM	Candidate Name	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JUSTIN ARNOLD</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 2330 NW 71ST PL.		<b>Transaction ID : SB23.4249</b>
City ANKENY	State IA	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1133.55
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 6805.99

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. AUTOMATTIC, INC.</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address P.O. BOX 742771		<b>Transaction ID : SB23.4150</b>
City LOS ANGELES	State CA	
Zip Code 90074	Purpose of Disbursement WEB SERVICES	Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAITLIN BAAKLE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4251</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 491.59
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANNIE BAKER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C STREET NE		<b>Transaction ID : SB23.4253</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1780.79
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 5272.38

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. SEBASTIAN BARRON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4255</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 968.01
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARLON BATEMAN III</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4257</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 688.52
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4151</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 15.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1671.53

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4152</b>
City Washington	State DC	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 17.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4153</b>
City Washington	State DC	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 5.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4154</b>
City Washington	State DC	
Purpose of Disbursement BANK FEES	Candidate Name	Amount of Each Disbursement this Period 15.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 37.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4155</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 633.71
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4156</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 582.71
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 1909 K St., NW		<b>Transaction ID : SB23.4157</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement BANK FEES	Amount of Each Disbursement this Period 36.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 633.71

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial)  
**A. BB&T FINANCIAL SERVICES**

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement  
CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : SB23.4159**

Amount of Each Disbursement this Period  
331.48

Memo Item

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

Mailing Address 140 WEST STREET

City NEW YORK State NY Zip Code 20007

Purpose of Disbursement  
PHONES/INTERNET

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : SB23.4159.0**

Amount of Each Disbursement this Period  
331.48

Memo Item

Full Name (Last, First, Middle Initial)  
**C. BB&T FINANCIAL SERVICES**

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement  
CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

**Transaction ID : SB23.4160**

Amount of Each Disbursement this Period  
379.32

Memo Item

**Subtotal Of Receipts This Page** (optional)..... → 710.80

**Total This Period** (last page this line number only)..... →

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4160.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement Travel	Zip Code 20036	Amount of Each Disbursement this Period 24.61
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WPENGINE.COM</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 504 LAVACA ST. STE. 1000		<b>Transaction ID : SB23.4160.2</b>
City AUSTIN	State TX	
Purpose of Disbursement WEB SERVICES	Zip Code 78701	Amount of Each Disbursement this Period 249.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FAIRPOINT COMMUNICATIONS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 521 E. MORELAND ST		<b>Transaction ID : SB23.4160.3</b>
City CHARLOTTE	State NC	
Purpose of Disbursement TELEPHONES	Zip Code 28202	Amount of Each Disbursement this Period 96.71
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4161</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS		Amount of Each Disbursement this Period 4500.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4161.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL		Amount of Each Disbursement this Period 34.58
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. FONTS.COM</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 600 UNICORN PARK		<b>Transaction ID : SB23.4161.1</b>
City WOBURN	State MA	
Purpose of Disbursement SUBSCRIPTION SERVICE		Amount of Each Disbursement this Period 10.00
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 4500.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. TEN FORWARD CONSULTING</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 505 S ROSA RD		<b>Transaction ID : SB23.4161.2</b>
City MADISON	State WI	
Zip Code 53705	Purpose of Disbursement SUBSCRIPTION SERVICE	Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BASECAMP</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1222 SUTTER ST.		<b>Transaction ID : SB23.4161.3</b>
City SAN FRANCISCO	State CA	
Zip Code 94107	Purpose of Disbursement SUBSCRIPTION SERVICE	Amount of Each Disbursement this Period 29.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. GOOGLE</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1600 AMPATHEATOR PKWY #1500		<b>Transaction ID : SB23.4161.4</b>
City MOUNTAIN VIEW	State CA	
Zip Code 94035	Purpose of Disbursement WEB SERVICE	Amount of Each Disbursement this Period 1323.49
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1900 GALLOWS RD		<b>Transaction ID : SB23.4161.5</b>
City VIENNA State VA Zip Code 22182	Amount of Each Disbursement this Period 273.06	
Purpose of Disbursement TELEPHONE	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 3NG NETWORK</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 8300 NW 53RD ST		<b>Transaction ID : SB23.4161.6</b>
City DORAL State FL Zip Code 33166	Amount of Each Disbursement this Period 2257.09	
Purpose of Disbursement TELEPHONES	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMAZON.COM</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1200 12TH AVE. STE. 1200		<b>Transaction ID : SB23.4161.7</b>
City SEATTLE State WA Zip Code 98144	Amount of Each Disbursement this Period 472.78	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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23    24    25    26    27a  
 27b    28a    28b    28c    29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4162</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS		Amount of Each Disbursement this Period 403.65
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. AMAZON.COM</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 1200 12TH AVE. STE. 1200		<b>Transaction ID : SB23.4162.0</b>
City SEATTLE	State WA	
Purpose of Disbursement OFFICE SUPPLIES		Amount of Each Disbursement this Period 171.32
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SHOPIFY</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 150 ELGIN STREET		<b>Transaction ID : SB23.4162.1</b>
City OTTAWA, ON	State	
Purpose of Disbursement ONLINE SERVICES		Amount of Each Disbursement this Period 79.00
Candidate Name		<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

**Subtotal Of Receipts This Page** (optional)..... 403.65

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 1200 18TH ST., NW #700

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2016

Transaction ID : SB23.4162.2

Amount of Each Disbursement this Period: 21.08

Memo Item

Category/Type: 101

**B. COMCAST**

Full Name (Last, First, Middle Initial)

Mailing Address 8029 CORPORATE DR.

City WHITE MARSH State MD Zip Code 21236

Purpose of Disbursement INTERNET SEVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 07 / 2016

Transaction ID : SB23.4162.3

Amount of Each Disbursement this Period: 132.25

Memo Item

Category/Type: 101

**C. BB&T FINANCIAL SERVICES**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 24747

City TAMPA State FL Zip Code 33623

Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2016

Transaction ID : SB23.4163

Amount of Each Disbursement this Period: 32.07

Memo Item

Category/Type:

Subtotal Of Receipts This Page (optional)..... 32.07

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4163.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20036	Amount of Each Disbursement this Period 32.07
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4164</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	Zip Code 33623	Amount of Each Disbursement this Period 1508.80
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 611 PENN AVE		<b>Transaction ID : SB23.4164.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement SHIPPING	Zip Code 20003	Amount of Each Disbursement this Period 6.98
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1508.80

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4164.1</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20036	Amount of Each Disbursement this Period 59.90
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. LITMUS-CHARGE.COM</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 675 MASS AVE., #1		<b>Transaction ID : SB23.4164.2</b>
City CAMBRIDGE	State MA	
Purpose of Disbursement SUBSCRIPTION SERVICE	Zip Code 02319	Amount of Each Disbursement this Period 79.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. DOMINO'S</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 3780 MINNESOTA AVE		<b>Transaction ID : SB23.4164.3</b>
City WASHINGTON	State DC	
Purpose of Disbursement FOOD/BEVERAGE	Zip Code 20019	Amount of Each Disbursement this Period 22.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

<b>Subtotal Of Receipts This Page</b> (optional).....	0.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. 8133 EXTRA SPACE STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 910 SW 68 AVE		<b>Transaction ID : SB23.4164.4</b>
City MIAMI State FL Zip Code 33144	Amount of Each Disbursement this Period 389.92	
Purpose of Disbursement STORAGE	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GITHUB.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 88 COLIN P KELLY JR ST.		<b>Transaction ID : SB23.4164.5</b>
City SAN FRANCISCO State CA Zip Code 94107	Amount of Each Disbursement this Period 25.00	
Purpose of Disbursement WEB SERVICES	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALGOLIA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 589 HOWARD ST., #5		<b>Transaction ID : SB23.4164.6</b>
City SAN FRANCISCO State CA Zip Code 94101	Amount of Each Disbursement this Period 783.00	
Purpose of Disbursement WEB SERVICE	Category/Type 101	<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. BIG STOCK PHOTO</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 350 5TH AVE, FI 21		<b>Transaction ID : SB23.4164.7</b>
City NEW YORK	State NY	
Zip Code 10118	Purpose of Disbursement SUBSCRIPTION	Amount of Each Disbursement this Period 99.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. FEDEX</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address 400 NEW JERSEY AVE		<b>Transaction ID : SB23.4164.8</b>
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement SHIPPING	Amount of Each Disbursement this Period 44.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4165</b>
City TAMPA	State FL	
Zip Code 33623	Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	Amount of Each Disbursement this Period 2041.31
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>Subtotal Of Receipts This Page</b> (optional).....	2041.31
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. ADOBE</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 345 PARK AVE		<b>Transaction ID : SB23.4165.0</b>
City SAN JOSE	State CA	
Zip Code 95110	Purpose of Disbursement SOFTWARE	Amount of Each Disbursement this Period 12.99
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 1900 GALLOWS RD		<b>Transaction ID : SB23.4165.1</b>
City VIENNA	State VA	
Zip Code 22182	Purpose of Disbursement PHONES	Amount of Each Disbursement this Period 0.52
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CLOUDFARE</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 101 TOWNSEND STREET		<b>Transaction ID : SB23.4165.2</b>
City SAN FRANCISCO	State CA	
Zip Code 94107	Purpose of Disbursement WEB SERVICE	Amount of Each Disbursement this Period 25.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	0.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. COMCAST</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 8029 CORPORATE DR.		<b>Transaction ID : SB23.4165.3</b>
City WHITE MARSH	State MD	
Purpose of Disbursement INTERNET	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="214.85"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LEXISNEXIS</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 1150 18TH ST., NW #600		<b>Transaction ID : SB23.4165.4</b>
City WASHINGTON	State DC	
Purpose of Disbursement SUBSCRIPTION	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="904.16"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MERCHOLOGY</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 2600 FERNBROOK LANE N		<b>Transaction ID : SB23.4165.5</b>
City MINNEAPOLIS	State MN	
Purpose of Disbursement BUMPER STICKERS/T-SHIRTS	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="601.90"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. MICROSOFT</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 5405 WISCONSIN AVE		<b>Transaction ID : SB23.4165.6</b>
City CHEVY CHASE	State MD	
Purpose of Disbursement SUBSCRIPTION	Category/ Type 101	Amount of Each Disbursement this Period 2.82
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4165.7</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Category/ Type 101	Amount of Each Disbursement this Period 279.07
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4166</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	Category/ Type	Amount of Each Disbursement this Period 188.74
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

<b>Subtotal Of Receipts This Page</b> (optional).....	188.74
<b>Total This Period</b> (last page this line number only).....	



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4166.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20036	Amount of Each Disbursement this Period 128.79
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GOGOAIR</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 111 CANAL STREET #1500		<b>Transaction ID : SB23.4166.1</b>
City CHICAGO	State IL	
Purpose of Disbursement INTERNET SERVICE	Zip Code 60606	Amount of Each Disbursement this Period 59.95
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.4167</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	Zip Code 33623	Amount of Each Disbursement this Period 880.31
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	880.31
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. COMCAST</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 8029 CORPORATE DR.		<b>Transaction ID : SB23.4167.0</b>
City WHITE MARSH	State MD	
Purpose of Disbursement INTERNET	Candidate Name	Amount of Each Disbursement this Period 756.96
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type 101	

Full Name (Last, First, Middle Initial) <b>B. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.4167.1</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 123.35
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type 101	

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T FINANCIAL SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address P.O. BOX 24747		<b>Transaction ID : SB23.6098</b>
City TAMPA	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	Candidate Name	Amount of Each Disbursement this Period 6149.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____	Category/Type 101	

<b>Subtotal Of Receipts This Page</b> (optional).....	6149.93
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. UBER</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 1200 18TH ST., NW #700		<b>Transaction ID : SB23.6098.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20036	Amount of Each Disbursement this Period 159.84
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COMCAST</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 8029 CORPORATE DR.		<b>Transaction ID : SB23.6098.1</b>
City WHITE MARSH	State MD	
Purpose of Disbursement INTERNET	Zip Code 21236	Amount of Each Disbursement this Period 579.38
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DC CAB</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 1636 BLADENSBURG RD., NE		<b>Transaction ID : SB23.6098.2</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20002	Amount of Each Disbursement this Period 10.68
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	0.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. DIRECT TV</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address PO BOX 6550		<b>Transaction ID : SB23.6098.3</b>
City GREENWOOD VILLAGE	State CO	
Purpose of Disbursement UTILITIES	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="98.10"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FRONTIER</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 5504 CONNECTICUT AVE		<b>Transaction ID : SB23.6098.4</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="447.47"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STORAGE MART</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 2500 SE 14TH ST		<b>Transaction ID : SB23.6098.5</b>
City DES MOINES	State IA	
Purpose of Disbursement STORAGE	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="137.76"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	<input type="text" value="0.00"/>
<b>Total This Period</b> (last page this line number only).....	<input type="text"/>

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. SUN SOLUTIONS PRINTING</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 345 DREHER RD.		<b>Transaction ID : SB23.6098.6</b>
City WEST COLUMBIA	State SC	
Purpose of Disbursement PRINTING	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="292.00"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US POSTAL SERVICE</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 2700 CAMPUS DR.		<b>Transaction ID : SB23.6098.7</b>
City SAN MATEO	State CA	
Purpose of Disbursement POSTAGE	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="37.73"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 140 WEST STREET		<b>Transaction ID : SB23.6098.8</b>
City NEW YORK	State NY	
Purpose of Disbursement INTERNET	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="4351.97"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. WASHINGTON METRO</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 50 MASS AVE		<b>Transaction ID : SB23.6098.9</b>
City WASHINGTON	State DC	
Purpose of Disbursement TRAVEL	Zip Code 20002	Amount of Each Disbursement this Period 35.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KARL BECKSTEIN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 39 STONEHEDGE PLACE		<b>Transaction ID : SB23.4259</b>
City BOXBOROUGH	State MA	
Purpose of Disbursement SALARY	Zip Code 01719	Amount of Each Disbursement this Period 927.09
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RICHARD BEESON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4261</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Zip Code 20002	Amount of Each Disbursement this Period 1001.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1928.09

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JAMES BENNETT</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4263</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 509.31
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. KATELYN BOND</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address 250 E ST., NW		<b>Transaction ID : SB23.4265</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 469.46
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. VIVIANA BOVO</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 765 W. 76TH ST.		<b>Transaction ID : SB23.4267</b>
City HIALEAH	State FL	
Purpose of Disbursement TRAVEL-SEE MEMOS	Candidate Name	Amount of Each Disbursement this Period 2190.77
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

**Subtotal Of Receipts This Page** (optional)..... 3169.54

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. HYATT REGENCY</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 400 NEW JERSEY AVE., NW		<b>Transaction ID : SB23.4267.0</b>
City WASHINGTON	State DC	
Purpose of Disbursement LODGING	Category/ Type 101	Amount of Each Disbursement this Period 1796.83
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL SKYLINE HOTEL</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 10 I ST., NW		<b>Transaction ID : SB23.4267.1</b>
City WASHINGTON	State DC	
Purpose of Disbursement LODGING	Category/ Type 101	Amount of Each Disbursement this Period 393.94
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. STEPHEN BOWEN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4269</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Category/ Type	Amount of Each Disbursement this Period 576.23
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**Subtotal Of Receipts This Page** (optional)..... 576.23

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. NATALIE BOYSE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4271</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 712.82
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATHAN BRAND</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4273</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 621.05
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CHRIS BRENNAN</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 341 BLACKLATCH LANE		Transaction ID : <b>SB23.4275</b>
City CAMP HILL	State PA	
Zip Code 17011	Purpose of Disbursement TRAVEL-SEE MEMOS	Amount of Each Disbursement this Period 1364.98
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2698.85

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. CHRIS BRENNAN</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 341 BLACKLATCH LANE		<b>Transaction ID : SB23.4275.0</b>
City CAMP HILL	State PA	
Purpose of Disbursement MILEAGE	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="268.80"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OFFICE DEPOT</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 6416 CARLISLE PIKE STE. 2700		<b>Transaction ID : SB23.4275.1</b>
City MECHANICSBURG	State PA	
Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="33.90"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VFW POST 3612</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 305 W MORELAND RD		<b>Transaction ID : SB23.4275.2</b>
City WILLOW GROVE	State PA	
Purpose of Disbursement ROOM RENTAL	<input type="text" value="101"/>	Amount of Each Disbursement this Period <input type="text" value="280.00"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL SUPPORT SERVICES</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 300 N 2ND ST.		<b>Transaction ID : SB23.4275.3</b>
City HARRISBURG	State PA	
Purpose of Disbursement PETITION COPIES	Zip Code 17101	Amount of Each Disbursement this Period 463.01
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 4203 UNION DEPOSIT RD.		<b>Transaction ID : SB23.4275.4</b>
City HARRISBURG	State PA	
Purpose of Disbursement OFFICE SUPPLIES	Zip Code 17101	Amount of Each Disbursement this Period 58.27
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. PA DEPARTMENT OF STATE</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 302 N. OFFICE BUILDING		<b>Transaction ID : SB23.4275.5</b>
City HARRISBURG	State PA	
Purpose of Disbursement COPIES	Zip Code 17120	Amount of Each Disbursement this Period 261.00
Candidate Name	Category/ Type 101	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. PATRICK BRENNAN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4277</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 901.56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. ANDREW BREY</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		Transaction ID : <b>SB23.4279</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 576.23
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. MR. GREGORY BROOKS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 400 SEWARD SQUARE SE		Transaction ID : <b>SB23.4281</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 988.47
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 2466.26

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JOHN BURKE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4283</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 659.12
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CALDWELL TRANSPORTATION COMPANY, INC.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address PO BOX 607		<b>Transaction ID : SB23.4169</b>
City CALDWELL	State ID	
Zip Code 83606	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 1725.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. CATHERINE CAMPBELL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4285</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1374.24
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... 3758.36

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL CHENDERLIN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4287</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Zip Code 20024	Amount of Each Disbursement this Period 1132.06
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CHESTERFIELD COUNTY PUBLIC SCHOOLS</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 9800 KRAUSE ROAD		<b>Transaction ID : SB23.4171</b>
City CHESTERFIELD	State VA	
Purpose of Disbursement SITE RENTAL	Zip Code 23832	Amount of Each Disbursement this Period 300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DANIEL CICILIA</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4289</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Zip Code 20003	Amount of Each Disbursement this Period 620.79
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

**Subtotal Of Receipts This Page** (optional)..... 2052.85

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		Transaction ID : <b>SB23.4173</b>
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATA MANAGEMENT	Category/Type	Amount of Each Disbursement this Period 6240.52
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2016
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		Transaction ID : <b>SB23.4174</b>
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATA MANAGEMENT	Category/Type	Amount of Each Disbursement this Period 225.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		Transaction ID : <b>SB23.4175</b>
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATA MANAGEMENT	Category/Type	Amount of Each Disbursement this Period 48234.34
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	<input type="checkbox"/> Other (specify) ▼	

Subtotal Of Receipts This Page (optional).....	54699.86
Total This Period (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. CAITLIN CONANT</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4291</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1838.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. ARIELLE COTTRELL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4293</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1022.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. THOMAS DATWYLER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 501 C ST., NE		<b>Transaction ID : SB23.4295</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1771.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 4632.93

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. THOMAS DATWYLER</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2016
Mailing Address 501 C ST., NE		<b>Transaction ID : SB23.4296</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1695.16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. KRISTIN DAVISON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4298</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1074.99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. THERESA DELUCA</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4300</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 789.61
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 3559.76

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. LEONARD DUNCAN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 77 H ST NW APT 102		<b>Transaction ID : SB23.4302</b>
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 867.63
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EVENTS UNITED</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 10 TINKER AVE., UNIT E		<b>Transaction ID : SB23.4177</b>
City LONDONDERRY	State NH	
Zip Code 03053	Purpose of Disbursement SITE RENTAL	Amount of Each Disbursement this Period 5500.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DANIEL FISHER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4304</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 883.18
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... **7250.81**

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. FORTY TWO EVENT PRODUCTION</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 2325 MAHONING AVE		Transaction ID : <b>SB23.4179</b>
City YOUNGSTOWN	State OH	
Zip Code 44509	Purpose of Disbursement EVENT PRODUCTION	Amount of Each Disbursement this Period 3537.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE GARVEY</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 255 WOODLAND ST.		Transaction ID : <b>SB23.4306</b>
City WEST BOYLSTON	State MA	
Zip Code 01583	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 541.72
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CELIA GLASSMAN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 2529 GOOSE POND CT #23		Transaction ID : <b>SB23.4308</b>
City TALLAHASSEE	State FL	
Zip Code 32308	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 601.54
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4680.26

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





**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JUSTIN HIGGINS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4318</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 875.56
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATHAN HOHNSTEIN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4320</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 639.72
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM HOLLEY</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4322</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 2752.78
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4268.06

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. INSPERITY</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 8171 MAPLE LAWN BLVD., STE. 300		<b>Transaction ID : SB23.4184</b>
City FULTON	State MD	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Amount of Each Disbursement this Period 43561.93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. INSPERITY</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2016
Mailing Address 8171 MAPLE LAWN BLVD., STE. 300		<b>Transaction ID : SB23.4185</b>
City FULTON	State MD	
Purpose of Disbursement PAYROLL TAXES	Candidate Name	Amount of Each Disbursement this Period 2429.82
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. JAN-PRO OF COLUMBIA</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 4727 SUNSET BLVD, SUITE A		<b>Transaction ID : SB23.4187</b>
City LEXINGTON	State SC	
Purpose of Disbursement SITE RENTAL	Candidate Name	Amount of Each Disbursement this Period 315.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

<b>Subtotal Of Receipts This Page</b> (optional).....	46306.75
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial)

**A. JEFF AMBERG PHOTOGRAPHY**

Mailing Address 1017 FERGUSON ST.

City COLUMBIA State SC Zip Code 29201

Purpose of Disbursement  
PHOTOGRAPHY

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB23.4189

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAIGE JOHNSON**

Mailing Address 73 FOXWOOD DRIVE

City NASHUA State NY Zip Code 11753

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB23.4324

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. BRANDON JORDAN**

Mailing Address 250 E ST., SW

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

Transaction ID : SB23.4326

Amount of Each Disbursement this Period

Memo Item

Subtotal Of Receipts This Page (optional).....

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. MOLLY KEPNER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4328</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 601.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. ALEXANDER KUEHLER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 575 MILL RUN ST.		<b>Transaction ID : SB23.4330</b>
City EARLYSVILLE	State VA	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 597.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. KATHERINE KUENZLE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4332</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 592.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 1791.71

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. KELLY KUNDINGER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4334</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 621.73
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NICHOLAS LARSON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4336</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 822.43
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDREW LAUTZ</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4338</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 663.69
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2107.85

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. CHRISTINA MANDREUCCI</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., NW		<b>Transaction ID : SB23.4346</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 654.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. JULIA MAZZONE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 70 I STREET SE #318		<b>Transaction ID : SB23.4348</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 598.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. CAROLINE MCCAIN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4350</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 875.29
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 2128.73

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. KARA MCKEE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4352</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 789.25
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MEDIA DC</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 1150 17TH STREET NW		<b>Transaction ID : SB23.4193</b>
City WASHINGTON	State DC	
Zip Code 20036	Purpose of Disbursement MEDIA PRODUCTION	Amount of Each Disbursement this Period 592.50
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MEYER, UNKOVIC &amp; SCOTT LLP</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 537 SMITHFIELD ST.		<b>Transaction ID : SB23.4195</b>
City PITTSBURGH	State PA	
Zip Code 15222	Purpose of Disbursement LEGAL FEES	Amount of Each Disbursement this Period 10000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 11381.75

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. KRISTINE MICHALSON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 637 5TH STREET NE		<b>Transaction ID : SB23.4354</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 910.69
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. MIDAMERICAN ENERGY</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2016
Mailing Address 1630 LOWER MUSCATINE ROAD		<b>Transaction ID : SB23.4197</b>
City IOWA CITY	State IA	
Purpose of Disbursement UTILITIES	Candidate Name	Amount of Each Disbursement this Period 70.67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. ELI MILLER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4356</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1250.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/Type	

<b>Subtotal Of Receipts This Page</b> (optional).....	2232.11
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. MAX MILLER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E STREET SW		<b>Transaction ID : SB23.4358</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 542.46
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. MOUNT VERNON PRINT COMMUNICATIONS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 13201 MID ATLANTIC BLVD, STE. 100		<b>Transaction ID : SB23.4199</b>
City LAUREL	State MD	
Zip Code 20708	Purpose of Disbursement DIRECT MAIL PRODUCTION	Amount of Each Disbursement this Period 2363.36
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. ZACHARY MULDER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 104 3RD AVE		<b>Transaction ID : SB23.4360</b>
City DOON	State IA	
Zip Code 51235	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 663.48
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Subtotal Of Receipts This Page (optional)..... **3569.30**

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. DANIEL O'DRISCOLL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4362</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1702.18
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Ocean Reef Club</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 35 Ocean Reef Dr.		<b>Transaction ID : SB23.4137</b>
City Key Largo	State FL	
Purpose of Disbursement Catering	Candidate Name	Amount of Each Disbursement this Period 10344.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. LETICIA PADRON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 7445 SW 72 AVE		<b>Transaction ID : SB23.4364</b>
City MIAMI	State FL	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1109.86
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... 13156.15

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. PALM BEACH ATLANTIC UNIVERSITY</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address PO BOX 24708		Transaction ID : <b>SB23.4201</b>
City WEST PALM BEACH	State FL	
Zip Code 33416	Purpose of Disbursement SITE RENTAL	Amount of Each Disbursement this Period 1399.20
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. OLIVIA PEREZ-CUBAS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4366</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 799.31
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CABOT PHILLIPS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4368</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 716.25
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2914.76

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. HUDSON PHILLIPS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4370</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 713.89
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PLUVIOUS GROUP LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 515 S. FIGUEROA STREET 16TH FLOOR		<b>Transaction ID : SB23.4203</b>
City LOS ANGELES	State CA	
Zip Code 90071	Purpose of Disbursement FUNDRAISING CONSULTING	Amount of Each Disbursement this Period 1872.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Push Digital LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address PO Box 7431		<b>Transaction ID : SB23.4139</b>
City Columbia	State SC	
Zip Code 29202	Purpose of Disbursement Web Services	Amount of Each Disbursement this Period 50000.00
Candidate Name	Category/Type 101	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 52585.89

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. REVOLVIS CONSULTING INC.</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 7185 NAVAJO ROAD		Transaction ID : <b>SB23.4205</b>
City SAN DIEGO	State CA	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 504.08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. ALEX RICHMOND</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		Transaction ID : <b>SB23.4372</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 516.79
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. DELINDA RIDINGS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4374</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 999.59
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... 2020.46

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. ROANOKE COLLEGE</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 221 COLLEGE LANE		<b>Transaction ID : SB23.4207</b>
City SALEM	State VA	
Purpose of Disbursement SITE RENTAL	Candidate Name	Amount of Each Disbursement this Period 5797.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SARAH ROBINSON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4376</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1189.81
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANNA ROGERS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4378</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 2547.58
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 9535.26

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. TREY ROSSER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 9550 W. SAHARA AVE, APT 3023		Transaction ID : <b>SB23.4380</b>
City LAS VEGAS	State NV	
Zip Code 89117	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 802.99
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JORDAN RUSSELL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 306 C STREET SE		Transaction ID : <b>SB23.4382</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1139.07
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BROOKE SAMMON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NW		Transaction ID : <b>SB23.4384</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1361.35
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... **3303.41**

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial)  
**A. SATELLINK COMMUNICATIONS SERVICES, INC.**

Mailing Address 4014 MOSSY OAK DRIVE

City LAKELAND State FL Zip Code 33810

Purpose of Disbursement  
COMMUNICATIONS SEVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

Transaction ID : **SB23.4209**

Amount of Each Disbursement this Period  
5181.55

Memo Item

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

Mailing Address 501 C STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 01 / 2016

Transaction ID : **SB23.4386**

Amount of Each Disbursement this Period  
887.59

Memo Item

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

Mailing Address 501 C STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement  
MM / DD / YYYY  
04 / 16 / 2016

Transaction ID : **SB23.4387**

Amount of Each Disbursement this Period  
472.09

Memo Item

Subtotal Of Receipts This Page (optional)..... → 6541.23

Total This Period (last page this line number only)..... →

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A. SHAWN SEMMLER**

Full Name (Last, First, Middle Initial)

Mailing Address 9 JULIE LANE

City EDWARDSVILLE State IL Zip Code 62025

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2016

Transaction ID : SB23.4389

Amount of Each Disbursement this Period: 886.83

Memo Item

Category/Type

**B. SHOPIFY**

Full Name (Last, First, Middle Initial)

Mailing Address 150 ELGIN STREET

City OTTAWA, ON State Zip Code

Purpose of Disbursement ONLINE PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2016

Transaction ID : SB23.4234

Amount of Each Disbursement this Period: 63.91

Memo Item

Category/Type: 101

**C. SHOPIFY**

Full Name (Last, First, Middle Initial)

Mailing Address 150 ELGIN STREET

City OTTAWA, ON State Zip Code

Purpose of Disbursement ONLINE PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 30 / 2016

Transaction ID : SB23.4236

Amount of Each Disbursement this Period: 184.83

Memo Item

Category/Type: 101

Subtotal Of Receipts This Page (optional)..... 1135.57

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JONATHAN SLEMROD</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4391</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1313.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. JARED SMALL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E STREET SW SUITE 24		<b>Transaction ID : SB23.4393</b>
City WASHINGTON	State IA	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 700.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. KAYLIE SMIGEL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4395</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 735.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 2748.66

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. SOLVERE ONE, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 22365 BRODERICK DRIVE #100		<b>Transaction ID : SB23.4211</b>
City STERLING	State VA	
Purpose of Disbursement RENT	Category/ Type	Amount of Each Disbursement this Period 750.00
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHAUNCEY SOUTHWORTH III</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., NW		<b>Transaction ID : SB23.4397</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Category/ Type	Amount of Each Disbursement this Period 572.20
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MATTHEW SPARKS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4399</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Category/ Type	Amount of Each Disbursement this Period 576.23
Candidate Name		<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 1898.43

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. SQUARE</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 1455 MARKET ST.		<b>Transaction ID : SB23.4213</b>
City SAN FRANCISCO	State CA	
Purpose of Disbursement ONLINE PROCESSING	Candidate Name	Amount of Each Disbursement this Period 15.86
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. STRIPE</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 140 2ND ST.		<b>Transaction ID : SB23.4215</b>
City SAN FRANCISCO	State CA	
Purpose of Disbursement ONLINE PROCESSING	Candidate Name	Amount of Each Disbursement this Period 604.46
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. ALEC SUGARMAN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4401</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 696.86
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

<b>Subtotal Of Receipts This Page</b> (optional).....	1317.18
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. TERRY SULLIVAN</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 503 C ST. NE		<b>Transaction ID : SB23.4403</b>
City WASHINGTON	State DC	
Purpose of Disbursement STRATEGIC CONSULTING	Zip Code 20002	Amount of Each Disbursement this Period 8250.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TARGETED VICTORY</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address PO BOX 2187		<b>Transaction ID : SB23.4217</b>
City ARLINGTON	State VA	
Purpose of Disbursement ONLINE PROCESSING	Zip Code 22202	Amount of Each Disbursement this Period 1059.92
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MACKENZIE TAYLOR-PIGG</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4405</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Zip Code 20024	Amount of Each Disbursement this Period 665.65
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 9975.57

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. ANDREW TEETSEL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4407</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1323.04
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. MATT TERRILL</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4409</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1703.67
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. MATT TERRILL</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4410</b>
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1627.61
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

**Subtotal Of Receipts This Page** (optional)..... 4654.32

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. THE BAUPOST GROUP, L.L.C.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 10 ST. JAMES AVE. STE. 1700		Transaction ID : <b>SB23.4219</b>
City BOSTON	State MA	
Zip Code 02116	Purpose of Disbursement TRAVEL	Amount of Each Disbursement this Period 213.60
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMMA THOMSON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		Transaction ID : <b>SB23.4412</b>
City WASHINGTON	State DC	
Zip Code 20024	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 679.98
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LAUREN TOOMEY</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4414</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 967.09
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 1860.67

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. TRANSAXT</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 190 MONROE AVE. NW STE. 500		Transaction ID : <b>SB23.4221</b>
City GRAND RAPIDS State MI Zip Code 49503	Amount of Each Disbursement this Period 573.15	
Purpose of Disbursement ONLINE PROCESSING	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. TRANSAXT</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2016
Mailing Address 190 MONROE AVE. NW STE. 500		Transaction ID : <b>SB23.4222</b>
City GRAND RAPIDS State MI Zip Code 49503	Amount of Each Disbursement this Period 95.82	
Purpose of Disbursement ONLINE PROCESSING	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. TREASURER OF CHESTERFIELD COUNTY</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address PO BOX 148		Transaction ID : <b>SB23.4224</b>
City CHESTERFIELD State VA Zip Code 23832	Amount of Each Disbursement this Period 3290.00	
Purpose of Disbursement SITE RENTAL	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Subtotal Of Receipts This Page (optional)..... 3958.97

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

23     24     25     26     27a  
 27b     28a     28b     28c     29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

**A. JOSEPH TUZZOLINO**

Full Name (Last, First, Middle Initial)

Mailing Address 503 C ST., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 04 / 01 / 2016

Transaction ID : SB23.4416

Amount of Each Disbursement this Period: 930.90

Memo Item

Category/Type

**B. U.S. SPACE AND ROCKET CENTER**

Full Name (Last, First, Middle Initial)

Mailing Address 1 TRANQUILITY BASE

City HUNTSVILLE State AL Zip Code 35805

Purpose of Disbursement SITE RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 04 / 07 / 2016

Transaction ID : SB23.4226

Amount of Each Disbursement this Period: 2000.00

Memo Item

Category/Type

**C. US POSTAL SERVICE**

Full Name (Last, First, Middle Initial)

Mailing Address 2700 CAMPUS DR.

City SAN MATEO State CA Zip Code 94497

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY 04 / 10 / 2016

Transaction ID : SB23.4228

Amount of Each Disbursement this Period: 70.00

Memo Item

Category/Type

Subtotal Of Receipts This Page (optional)..... 3000.90

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. COURTNEY VEATCH</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 809 PERRY STREET #302		<b>Transaction ID : SB23.4418</b>
City DAVENPORT	State IA	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 662.92
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. SAMUEL VETTER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., NW		<b>Transaction ID : SB23.4420</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 458.56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. ELISSA ANN VOCCOLA</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4422</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 940.58
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Subtotal Of Receipts This Page (optional)..... 2062.06

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. REBECCA WASSERSTEIN</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		Transaction ID : <b>SB23.4424</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 1480.29
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WESTERN CAROLINA STATE FAIR FOUNDATION, INC.</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address PO BOX 1272		Transaction ID : <b>SB23.4230</b>
City AIKEN	State SC	
Zip Code 29082	Purpose of Disbursement SITE RENTAL	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DANIEL WETTER</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 1620 STEINBECK DR		Transaction ID : <b>SB23.4426</b>
City ROSEVILLE	State CA	
Zip Code 95747	Purpose of Disbursement SALARY	Amount of Each Disbursement this Period 486.88
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 2967.17

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. JORDAN WIGGINS</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 150 LINK DRIVE #303		<b>Transaction ID : SB23.4428</b>
City ATTICA	State MI	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 811.21
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. JAHAN WILCOX</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4430</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 1422.94
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. ERIC WILSON</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 503 C ST., NE		<b>Transaction ID : SB23.4432</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 2837.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 5071.15

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. WWP STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address P.O. BOX 24215		<b>Transaction ID : SB23.4232</b>
City LANSING	State MI	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 8292.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. WWP STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address P.O. BOX 24215		<b>Transaction ID : SB23.4233</b>
City LANSING	State MI	
Purpose of Disbursement TRAVEL	Candidate Name	Amount of Each Disbursement this Period 231.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL ZONA</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 250 E ST., SW		<b>Transaction ID : SB23.4434</b>
City WASHINGTON	State DC	
Purpose of Disbursement SALARY	Candidate Name	Amount of Each Disbursement this Period 858.90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 9382.21

**Total This Period** (last page this line number only)..... 362847.71

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Karen Alvarez</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 1606 Chandler Rd		<b>Transaction ID : SB28A.4538</b>
City Huntsville	State AL Zip Code 35801	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Steve Van Amburgh</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 3945 Marquette		<b>Transaction ID : SB28A.4612</b>
City Dallas	State TX Zip Code 75225	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stewart Baker</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2016
Mailing Address P.O. Box 980338		<b>Transaction ID : SB28A.4614</b>
City Houston	State TX Zip Code 77098	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 145.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 1175.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Ray Barrette</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address P.O. Box 5254		<b>Transaction ID : SB28A.4588</b>
City Hanover	State NH	
Zip Code 03755	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Perry Beaton</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 853 Vanderbilt Beach Rd, #249		<b>Transaction ID : SB28A.4580</b>
City Naples	State FL	
Zip Code 34108	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thomas Bell Jr.</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address P.O. Box 425		<b>Transaction ID : SB28A.4620</b>
City Saratoga Springs	State NY	
Zip Code 12866	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	5900.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Ben Bequer</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 4980 Hidden Glen Lane		<b>Transaction ID : SB28A.4456</b>
City Yorba Linda	State CA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 600.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lawrence Black</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2016
Mailing Address 1107 North Main St.		<b>Transaction ID : SB28A.4546</b>
City Greenville	State SC	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Michael R. Blaire</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 10921 N 140th Way		<b>Transaction ID : SB28A.4570</b>
City Scottsdale	State AZ	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Lawrence Blanford</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 7575 Pelican Bay Blvd		<b>Transaction ID : SB28A.4548</b>
City Naples	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dan M. Blaylock</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 4229 Lenore Lane, NW		<b>Transaction ID : SB28A.4478</b>
City Washington	State DC	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adam Bold</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 1744 Stone Canyon Rd		<b>Transaction ID : SB28A.4436</b>
City Los Angeles	State CA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5700.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Carol Boose</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 4N657 Hidden Oaks Rd		<b>Transaction ID : SB28A.4466</b>
City St Charles	State IL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1350.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arthur J. Brass</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 1990 Post Oak Blvd		<b>Transaction ID : SB28A.4452</b>
City Houston	State TX	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Thaddeus Burns</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 4451 Longmeadow		<b>Transaction ID : SB28A.4618</b>
City Sarasota	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 100.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 4150.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Bill Cagle</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 5910 S University Blvd C18432		Transaction ID : <b>SB28A.4460</b>
City Greenwood Village	State CO	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2700.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Catesby W. Clay</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 616 Cynthiana Rd.		Transaction ID : <b>SB28A.4468</b>
City Paris	State KY	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Toni Collins</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2016
Mailing Address 609 Portledge Dr.		Transaction ID : <b>SB28A.4622</b>
City Bryn Mawr	State PA	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 170.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

<b>Subtotal Of Receipts This Page</b> (optional).....	3370.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Daniel Connealy</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 2108 W. 114th St.		<b>Transaction ID : SB28A.4482</b>
City Leawood	State KS	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. J.C. Crow</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2016
Mailing Address 18355 SW 293rd St.		<b>Transaction ID : SB28A.4514</b>
City Homestead	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1103.05
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anthony Dale</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2016
Mailing Address 36 Charter Oak Court		<b>Transaction ID : SB28A.4446</b>
City Ridgefield	State CT	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 1703.05

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Graeme L. Dayton</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 3971 Gulf Shore Blvd North Apt 110		<b>Transaction ID : SB28A.4506</b>
City Naples	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 200.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Adam Drewniany</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 30 Danford Ct		<b>Transaction ID : SB28A.4438</b>
City Redwood City	State CA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kim Duffy</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 484 E. Central Ave.		<b>Transaction ID : SB28A.4544</b>
City Lombard	State IL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 3000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Richard Elden</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 2430 N. Lakeview, Apt. 115		<b>Transaction ID : SB28A.4594</b>
City Chicago	State IL Zip Code 60614	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 5400.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lynn Elliott</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 426 Tecumseh Ln.		<b>Transaction ID : SB28A.4562</b>
City Houston	State TX Zip Code 77057	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2700.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Roger Enrico</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 3899 Maple Ave., Ste. 410		<b>Transaction ID : SB28A.4602</b>
City Dallas	State TX Zip Code 75219	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Subtotal Of Receipts This Page (optional)..... 13100.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. John Farmer</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 118 Waterstone Way		<b>Transaction ID : SB28A.4528</b>
City Louisville	State KY	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 375.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Roberto Fernandez-Blay</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2016
Mailing Address 4851 SW 111 Terrace		<b>Transaction ID : SB28A.4600</b>
City Fort Lauderdale	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 300.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Lawrence Field</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 433 N. Camden Dr., #280		<b>Transaction ID : SB28A.4550</b>
City Beverly Hills	State CA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Subtotal Of Receipts This Page (optional)..... 1675.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Lee Fino</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 234 Oak Dr.		<b>Transaction ID : SB28A.4554</b>
City Lansdale	State PA	
Zip Code 19446	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1505.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. J.A. Folino</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 316 Tiffany Ct.		<b>Transaction ID : SB28A.4512</b>
City Gibsonia	State PA	
Zip Code 15044	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 8100.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Tara H. Ford</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2016
Mailing Address 809 North Railroad Avenue		<b>Transaction ID : SB28A.4616</b>
City West Palm Beach	State FL	
Zip Code 33401	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 305.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 9910.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Leah Frankel</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 478 Mariner Dr.		<b>Transaction ID : SB28A.4552</b>
City Jupiter	State FL	
Zip Code 33477	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Craig Thomas Glover</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 2832 N. Country Club Road		<b>Transaction ID : SB28A.4476</b>
City Muskogee	State OK	
Zip Code 74403	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 597.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mary Morgan Graves</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 3746 Hadley Hill Drive		<b>Transaction ID : SB28A.4568</b>
City Santa Rosa	State CA	
Zip Code 95404	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 800.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	2397.00
<b>Total This Period</b> (last page this line number only).....	

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Van Greenfield</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 76 White Pine Canyon Rd.		<b>Transaction ID : SB28A.4624</b>
City Park City	State UT	
Zip Code 84060	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jerry A. Grundhofer</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 9811 W. Charleston Blvd #2-163		<b>Transaction ID : SB28A.4524</b>
City Las Vegas	State NV	
Zip Code 89117	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. James Hendrickson</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address P.O. Box 5207		<b>Transaction ID : SB28A.4520</b>
City Incline Village	State NV	
Zip Code 89450	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	1750.00
<b>Total This Period</b> (last page this line number only).....	



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Peter Herschend</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 538 Oak Bluff Rd.		<b>Transaction ID : SB28A.4584</b>
City Branson	State MO	
Zip Code 65616	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arthur Hudson</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 9155 Sloane St.		<b>Transaction ID : SB28A.4450</b>
City Orlando	State FL	
Zip Code 32827	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Norman E. Jackson</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2016
Mailing Address 4230 Lake Forest Dr., Unit 811		<b>Transaction ID : SB28A.4574</b>
City Bonita Springs	State FL	
Zip Code 34134	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 900.40
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 3900.40

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Stephen Kahn</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 2500 Filbert St.		<b>Transaction ID : SB28A.4610</b>
City San Francisco	State CA	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Daniel Kearney</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 1550 N State Parkway		<b>Transaction ID : SB28A.4484</b>
City Chicago	State IL	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) <b>c. Ray Keller</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 33613 U.S. Hwy 72		<b>Transaction ID : SB28A.4590</b>
City Hollywood	State AL	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 3600.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Glenna S. Kendall</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 9816 24th Ave., NW		<b>Transaction ID : SB28A.4504</b>
City Seattle	State WA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Chris Klein</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 385 Dundee Road		<b>Transaction ID : SB28A.4470</b>
City Glencoe	State IL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 20.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Robert Lamendola</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2016
Mailing Address 1110 New York Ave		<b>Transaction ID : SB28A.4596</b>
City Cape May	State NJ	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 570.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Anton Leroy</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 22 Warren Street Apt 5		<b>Transaction ID : SB28A.4448</b>
City New York	State NY	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brian Levine</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 535 West End Ave., Apt. 4B		<b>Transaction ID : SB28A.4464</b>
City New York	State NY	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 65.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Elsie Y. Lewis</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 607 Poia Road		<b>Transaction ID : SB28A.4492</b>
City Sewickley	State PA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 500.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	3265.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Jeff Litow</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 5700 Sea View Dr.		<b>Transaction ID : SB28A.4522</b>
City Malibu State CA Zip Code 90265	Amount of Each Disbursement this Period 550.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Aimee J. Locke</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2016
Mailing Address 601 Contour Drive		<b>Transaction ID : SB28A.4440</b>
City San Antonio State TX Zip Code 78212	Amount of Each Disbursement this Period 5.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. David J. Lundquist</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2016
Mailing Address 6277 North Ocean Blvd		<b>Transaction ID : SB28A.4488</b>
City Boynton Beach State FL Zip Code 33435	Amount of Each Disbursement this Period 700.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

<b>Subtotal Of Receipts This Page</b> (optional).....	1255.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Eugene Massamillo</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 133 Tradd St.		<b>Transaction ID : SB28A.4494</b>
City Charleston	State SC	
Zip Code 29401	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 150.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Julia Jones Matthews</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address P.O. Box 176		<b>Transaction ID : SB28A.4536</b>
City Abilene	State TX	
Zip Code 79604	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2080.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. James Heath Mayo</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2016
Mailing Address 109 Church Street, Apt. 602		<b>Transaction ID : SB28A.4518</b>
City New Haven	State CT	
Zip Code 06510	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 54.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	2284.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. David McAvoy</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 11 Mountview Road		<b>Transaction ID : SB28A.4490</b>
City Wellesley Hills	State MA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 290.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Malcolm Mciver</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 7860 SW Northvale Way		<b>Transaction ID : SB28A.4564</b>
City Portland	State OR	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne Miller</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 6274 Willowgate		<b>Transaction ID : SB28A.4444</b>
City Dallas	State TX	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... → 5290.00

**Total This Period** (last page this line number only)..... →

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Ronald Miller</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 311 Miller Ave.		<b>Transaction ID : SB28A.4604</b>
City Mill Valley	State CA	
Zip Code 94941	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Regina Mitchell</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2016
Mailing Address 3625 E Market St.		<b>Transaction ID : SB28A.4592</b>
City Warren	State OH	
Zip Code 44484	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 295.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Welton Modisette</b>		Date of Disbursement MM / DD / YYYY 04 / 04 / 2016
Mailing Address 9502 Sweetbay Court		<b>Transaction ID : SB28A.4626</b>
City Waxhaw	State NC	
Zip Code 28173	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	3295.00
<b>Total This Period</b> (last page this line number only).....	



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Bernie Moreno</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2016
Mailing Address 29889 Chairmans Rowe		<b>Transaction ID : SB28A.4458</b>
City Westlake	State OH	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 60.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Furman Moseley</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 411 University St.		<b>Transaction ID : SB28A.4498</b>
City Seattle	State WA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Phyllis Nolan</b>		Date of Disbursement MM / DD / YYYY 04 / 03 / 2016
Mailing Address 25910 Spring Valley Road		<b>Transaction ID : SB28A.4586</b>
City Louisburg	State KS	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2760.00
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Subtotal Of Receipts This Page (optional).....

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER:  
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<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Patrick Oshaughnessy</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 301 S. Market		<b>Transaction ID : SB28A.4576</b>
City Wichita	State KS	
Zip Code 67202	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2300.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gary Pasquinelli</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address PO Box 2949		<b>Transaction ID : SB28A.4500</b>
City Yuma	State AZ	
Zip Code 85366	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 3000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kevin Pollari</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2016
Mailing Address 5310 Meaders Lane		<b>Transaction ID : SB28A.4542</b>
City Dallas	State TX	
Zip Code 75229	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 250.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Subtotal Of Receipts This Page (optional)..... 5550.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Bonnie L. Re</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2016
Mailing Address 2646 NW 63 Place		<b>Transaction ID : SB28A.4462</b>
City Boca Raton	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 650.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Regan</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 790 Bromfield Rd.		<b>Transaction ID : SB28A.4628</b>
City San Mateo	State CA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jorge Reynardus</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 11225 SW 99 Ct.		<b>Transaction ID : SB28A.4534</b>
City Miami	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 155.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	3505.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Scott Rigell</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 1301 Taylors Point Road Suite 100		<b>Transaction ID : SB28A.4608</b>
City Virginia Beach	State VA	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2700.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Danny Robbins</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 313 Val Verde		<b>Transaction ID : SB28A.4486</b>
City Altus	State OK	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>c. James A. Robertson</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 5954 NW 74 Terrace		<b>Transaction ID : SB28A.4516</b>
City Pompano Beach	State FL	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2050.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 5000.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Kathleen C. Rooney</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2016
Mailing Address 800 Admiralty		<b>Transaction ID : SB28A.4540</b>
City Naples	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1800.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sara Rose</b>		Date of Disbursement MM / DD / YYYY 04 / 07 / 2016
Mailing Address 10550 Hussey Lane		<b>Transaction ID : SB28A.4606</b>
City Carmel	State IN	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 60.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Louis P. Rossi</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 25917 San Rafael Ct		<b>Transaction ID : SB28A.4560</b>
City Howey In The Hills	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... → 2860.00

**Total This Period** (last page this line number only)..... →

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Robert Sanchez</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 4811 Palisade Drive		<b>Transaction ID : SB28A.4598</b>
City Austin State TX Zip Code 78731	Amount of Each Disbursement this Period 330.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. John Schreck</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 209 Pembroke Ave		<b>Transaction ID : SB28A.4532</b>
City Wayne State PA Zip Code 19087	Amount of Each Disbursement this Period 6175.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Paul A. Shackelford</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2016
Mailing Address 4810 NW 57th Place		<b>Transaction ID : SB28A.4578</b>
City Gainesville State FL Zip Code 32606	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Refund of Contribution	Candidate Name	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

**Subtotal Of Receipts This Page** (optional)..... 7505.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Lisa Shank</b>		Date of Disbursement MM / DD / YYYY 04 / 17 / 2016
Mailing Address 57424 Wilbur Hill Rd.		<b>Transaction ID : SB28A.4558</b>
City Dowagiac	State MI	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 877.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Clarence H. Smith</b>		Date of Disbursement MM / DD / YYYY 04 / 27 / 2016
Mailing Address 158 West Wesley Rd		<b>Transaction ID : SB28A.4474</b>
City Atlanta	State GA	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Peter F. Spano</b>		Date of Disbursement MM / DD / YYYY 04 / 14 / 2016
Mailing Address 4001 North Ocean Blvd.		<b>Transaction ID : SB28A.4582</b>
City Gulf Stream	State FL	
Purpose of Disbursement Refund of Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

**Subtotal Of Receipts This Page** (optional)..... 4577.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Mark Stalnecker</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 55 Selborne Dr.		<b>Transaction ID : SB28A.4566</b>
City Wilmington	State DE	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____ District: _____	Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. John Mark Stevenson</b>		Date of Disbursement MM / DD / YYYY 04 / 21 / 2016
Mailing Address 5658 Sugar Hill		<b>Transaction ID : SB28A.4530</b>
City Houston	State TX	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____ District: _____	Category/ Type	

Full Name (Last, First, Middle Initial) <b>c. John F. Stewart</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 91-1068 Waikapoo St		<b>Transaction ID : SB28A.4526</b>
City Ewa Beach	State HI	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 580.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____ District: _____	Category/ Type	

**Subtotal Of Receipts This Page** (optional)..... 2080.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Alexander Stuart</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2016
Mailing Address 506 Washington Rd.		<b>Transaction ID : SB28A.4442</b>
City Lake Forest	State IL	
Zip Code 60045	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 2700.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Linda S. Terhaar</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2016
Mailing Address 603 Bayshore Drive		<b>Transaction ID : SB28A.4556</b>
City Pensacola	State FL	
Zip Code 32507	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 894.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dana Trier</b>		Date of Disbursement MM / DD / YYYY 04 / 06 / 2016
Mailing Address 205 West 76th		<b>Transaction ID : SB28A.4480</b>
City New York	State NY	
Zip Code 10023	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 1050.00
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>Subtotal Of Receipts This Page</b> (optional).....	4644.00
<b>Total This Period</b> (last page this line number only).....	

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Greg Wilkinson</b>		Date of Disbursement MM / DD / YYYY 04 / 20 / 2016
Mailing Address 2703 Telecom Pkwy, #120		<b>Transaction ID : SB28A.4508</b>
City Richardson	State TX	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 150.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Michael Wilson</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 5534 Golden Heights Dr.		<b>Transaction ID : SB28A.4572</b>
City Fayetteville	State NY	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 2700.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Frederick S. Wonham</b>		Date of Disbursement MM / DD / YYYY 04 / 25 / 2016
Mailing Address 501 River Drive		<b>Transaction ID : SB28A.4496</b>
City Vero Beach	State FL	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 590.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: _____ District: _____		

**Subtotal Of Receipts This Page** (optional)..... 3440.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

Full Name (Last, First, Middle Initial) <b>A. Guillermo Zuloaga</b>		Date of Disbursement MM / DD / YYYY 04 / 24 / 2016
Mailing Address 13635 Deering Bay Drive Apt. 244		<b>Transaction ID : SB28A.4510</b>
City Coral Gables	State FL	
Purpose of Disbursement Refund of Contribution	Candidate Name	Amount of Each Disbursement this Period 300.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Candidate Name	<input type="checkbox"/> Memo Item
Office 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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Purpose of Disbursement	Candidate Name	<input type="checkbox"/> Memo Item
Office 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:		

<b>Subtotal Of Receipts This Page</b> (optional).....	300.00
<b>Total This Period</b> (last page this line number only).....	129100.45

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

<b>A.</b> Full Name (Last, First, Middle Initial) NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS POLITICAL ACTION COMMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2016	
Mailing Address 1325 G STREET, N.W. SUITE 1000		<b>Transaction ID : SB28C.4237</b>	
City WASHINGTON State DC Zip Code 20005	Purpose of Disbursement Refund of Contribution	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type 101	<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			
City State Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			
City State Zip Code	Purpose of Disbursement	Amount of Each Disbursement this Period	
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**Subtotal Of Receipts This Page** (optional)..... 5000.00

**Total This Period** (last page this line number only)..... 5000.00

# SCHEDULE D-P

## DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**FLS Connect LLC**

Nature of Debt (Purpose):  
Telemarketing

Mailing Address 7300 Hudson Blvd.  
Suite 270

City State Zip Code  
Saint Paul MN 55128

Outstanding Balance Beginning This Period

721032.94

Transaction ID : SD12.4122

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

721032.94

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**GBP Media LLC**

Nature of Debt (Purpose):  
Media Production

Mailing Address PMB 339

City State Zip Code  
Greenville SC 29611

Outstanding Balance Beginning This Period

400000.00

Transaction ID : SD12.4124

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

400000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**HOLTZMAN VOGEL JOSEFIK PLLC**

Nature of Debt (Purpose):  
LEGAL FEES

Mailing Address 45 NORTH HILL DR., STE. 100

City State Zip Code  
WARRENTON VA 20186

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD12.6139

Amount Incurred This Period

167000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

167000.00

- 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-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ocean Reef Club**

Nature of Debt (Purpose):  
 Catering

Mailing Address 35 Ocean Reef Dr.

City State Zip Code  
 Key Largo FL 33037

Outstanding Balance Beginning This Period

Transaction ID : SD12.4127

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Optimus Consulting LLC**

Nature of Debt (Purpose):  
 Strategic Consulting

Mailing Address 611 Pennsylvania Ave., SE  
 Box 269

City State Zip Code  
 Washington DC 20003

Outstanding Balance Beginning This Period

Transaction ID : SD12.4129

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  
**Patrick Henry College**

Nature of Debt (Purpose):  
 Site Rental

Mailing Address 10 Patrick Henry Circle

City State Zip Code  
 Purcellville VA 20132

Outstanding Balance Beginning This Period

Transaction ID : SD12.4131

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 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-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**MARCO RUBIO FOR PRESIDENT**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Push Digital LLC**

Nature of Debt (Purpose):  
 Web Services

Mailing Address PO Box 7431

City State Zip Code  
 Columbia SC 29202

Outstanding Balance Beginning This Period

Transaction ID : SD12.4133

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):  
 Event Production

Mailing Address 19566 Amaranth Dr.

City State Zip Code  
 Germantown MD 20874

Outstanding Balance Beginning This Period

Transaction ID : SD12.4135

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

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="263817.39"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="2067041.07"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only).....	<input type="text" value="2067041.07"/>