

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Kristi for Congress

ADDRESS (number and street)

PO Box 852

Check if different
than previously
reported. (ACC)

Sioux Falls

SD

57101

2. FEC IDENTIFICATION NUMBER ▼

C

C00476853

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

SD

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2015

through

M M / D D / Y Y Y Y
12 / 31 / 2015

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 Ted Husted

Signature of Treasurer Ted Husted

[Electronically Filed]

Date

M M / D D / Y Y Y Y
01 / 31 / 2016

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

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 166

Write or Type Committee Name

Kristi for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	314503.06	1233665.75
(b) Total Contribution Refunds (from Line 20(d))	6500	9650
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	308003.06	1224015.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	125277.64	584132.75
(b) Total Offsets to Operating Expenditures (from Line 14).....	63	8155.7
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	125214.64	575977.05
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1527665.11	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Kristi for Congress

Report Covering the Period:

From:

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

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

101693.05

514661.29

(ii) Unitemized.....

13650.55

80906.85

(iii) TOTAL of contributions from individuals ▶

115343.6

595568.14

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

199159.46

638097.61

(d) The Candidate.....

0

0

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

314503.06

1233665.75

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0

9629.37

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0

0

(b) All Other Loans.....

0

0

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0

0

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

63

8155.7

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

485.98

1718.52

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

315052.04

1253169.34

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	125277.64	584132.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1500	1900
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	5000	7750
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6500	9650
21. OTHER DISBURSEMENTS	150	25060
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	131927.64	618842.75

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1344540.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	315052.04
25. SUBTOTAL (add Line 23 and Line 24).....	1659592.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	131927.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1527665.11

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

BGR Government Affairs, LLC

Mailing Address PO Box 14416

City

Washington

State

DC

Zip Code

20044-4416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2015

Transaction ID : A-CF36911

Amount of Each Receipt this Period

500

See attribution

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

Full Name (Last, First, Middle Initial)

Erskine Wells

Mailing Address 8229 Stacey Road

City

Alexandria

State

VA

Zip Code

22308-1651

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

BGR Group

Principal

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2015

Transaction ID : A-PIP198

Amount of Each Receipt this Period

500

See attribution

[MEMO ITEM]
Partnership Itemization Memo

Full Name (Last, First, Middle Initial)

Lindskov Ranch Partnership

Mailing Address PO Box 24

City

Isabel

State

SD

Zip Code

57633-0024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2015

Transaction ID : A-CF36755

Amount of Each Receipt this Period

1000

See attribution

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

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

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

1500.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Bryce A. Lindskov

Mailing Address **PO Box 17**

City Isabel	State SD	Zip Code 57633-0017
-----------------------	--------------------	-------------------------------

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

Name of Employer Lindskov Ranch	Occupation Owner/Rancher
-------------------------------------------	------------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2015

Transaction ID : A-PIP197

Amount of Each Receipt this Period

1000

See attribution

[MEMO ITEM]

Partnership Itemization Memo

B. Full Name (Last, First, Middle Initial)
Rio Valley Biofuels, LLC

Mailing Address **3500 Doniphan Drive**

City El Paso	State TX	Zip Code 79922-1408
------------------------	--------------------	-------------------------------

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

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

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37073

Amount of Each Receipt this Period

2000

Attribution requested

C. Full Name (Last, First, Middle Initial)
Darla L. Assman

Mailing Address **28636 283rd Avenue**

City Mission	State SD	Zip Code 57555-5927
------------------------	--------------------	-------------------------------

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

Name of Employer Assman Land and Cattle	Occupation Owner
---------------------------------------------------	----------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36622

Amount of Each Receipt this Period

1000

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

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Ronald D. Bancroft

Mailing Address PO Box 287

City Hermosa State SD Zip Code 57744-0287

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 500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : A-CF36788

Amount of Each Receipt this Period

200

B. Full Name (Last, First, Middle Initial)
Jonathan Bass

Mailing Address 1107 Angelo Drive

City Beverly Hills State CA Zip Code 90210-2703

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

Name of Employer Pro Tour Memorabilia Occupation CEO

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2015

Transaction ID : A-CF36939

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Frank E. Baxter

Mailing Address 11100 Santa Monica Boulevard
Floor 11

City Los Angeles State CA Zip Code 90025-3384

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 500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2015

Transaction ID : A-CF36922

Amount of Each Receipt this Period

500

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

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

1200.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Justin L. Bell

Mailing Address 222 N Highland Avenue

City
PierreState
SDZip Code
57501-2506FEC ID number of contributing
federal political committee.

C

Name of Employer
May, Adam, GerdesOccupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : A-CF37115

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Mark Berlinger

Mailing Address 2829 W Crescent Court

City
VisaliaState
CAZip Code
93291-4248FEC ID number of contributing
federal political committee.

C

Name of Employer
Wawona PackingOccupation
VP Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36884

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Vincent H. Boddicker

Mailing Address 40818 257th Street

City
MitchellState
SDZip Code
57301-5844FEC ID number of contributing
federal political committee.

C

Name of Employer
G&R Agri Service IncOccupation
Ag Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36624

Amount of Each Receipt this Period

100

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

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

850.00

FOR LINE NUMBER:
(check only one)

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☒ 11a
 ☐ 11b
 ☐ 11c
 ☐ 11d
 ☐ 15

NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Melissa Bonicelli
Mailing Address 1721 N Cliff Street

City	State	Zip Code
Alexandria	VA	22301-1940

FEC ID number of contributing federal political committee.

Name of Employer
Venn Strategies, LLC

Occupation
Government Relations

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

MM / DD / YYYY

Transaction ID : A-CF37087

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)
Jane Boorman

B. Mailing Address 1425 4th Street SW
Apt. A607

City	State	Zip Code
Washington	DC	20024-2223

FEC ID number of contributing federal political committee.

Name of Employer
US Small Business Adm.

Occupation
Program Manager

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

Year	Value
2000	100
2001	100
2002	100
2003	100
2004	100
2005	100
2006	100
2007	100
2008	100
2009	100
2010	450
2011	450
2012	450
2013	450
2014	450
2015	450
2016	450
2017	450
2018	450
2019	450
2020	450

Date of Receipt

MM / DD / YYYY

Transaction ID : A-CF36625

Amount of Each Receipt this Period

A horizontal number line with 10 equal segments. The rightmost segment is labeled '500'.

Full Name (Last, First, Middle Initial)
W. E. Bosarge Jr.

C. Mailing Address 4203 Yoakum Boulevard
Suite 200

City	State	Zip Code
Houston	TX	77006-5455

FEC ID number of contributing federal political committee.

Name of Employer
Capital Technologies, Inc.

Occupation
Founder

Receipt For: 2016

☒ Primary ☐ General

☐ Other (specify)

Election Cycle-to-Date

Election Cycle	Value
2019-2020	2700

Date of Receipt

MM / DD / YYYY

Transaction ID : A-CF37141

Amount of Each Receipt this Period

2700

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

4200.00

**SCHEDULE A (FEC Form 3)
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial)

Rod Bowar

Mailing Address PO Box 91

City

Kennebec

State

SD

Zip Code

57544-0091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kennebec Telephone Co., Inc.

Occupation

President/Manager

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : A-CF36575

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Dale E. Bradshaw

Mailing Address 125 Summerwood Drive

City

Watertown

State

SD

Zip Code

57201-5475

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

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2015

Transaction ID : A-CF36810

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Bonnie L. Brouillard

Mailing Address PO Box 592

City

Custer

State

SD

Zip Code

57730-0592

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

350

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36661

Amount of Each Receipt this Period

100

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

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

700.00

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

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

FOR LINE NUMBER:

PAGE 11 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Robert J. Brunick

A.

Mailing Address 1689 Alviso Street

City

Simi Valley

State

CA

Zip Code

93065-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2015

Transaction ID : A-CF36591

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

Robert J. Brunick

B.

Mailing Address 1689 Alviso Street

City

Simi Valley

State

CA

Zip Code

93065-2157

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : A-CF37050

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Judy A. Buckingham

C.

Mailing Address 5311 Carriage Hills Drive

City

Rapid City

State

SD

Zip Code

57702-8304

FEC ID number of contributing
federal political committee.

C

Name of Employer
HomemakerOccupation
Homemaker

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF730

Amount of Each Receipt this Period

2700

Reattribution to spouse

[MEMO ITEM]

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

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

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Robert D. Buckingham

Mailing Address 5311 Carriage Hills Drive

City	State	Zip Code
Rapid City	SD	57702-8304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dlorah, Inc.Occupation
President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36761

Amount of Each Receipt this Period

5400

Reattribution/Redesignation requested

B. Full Name (Last, First, Middle Initial)
Robert D. Buckingham

Mailing Address 5311 Carriage Hills Drive

City	State	Zip Code
Rapid City	SD	57702-8304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dlorah, Inc.Occupation
President

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF729

Amount of Each Receipt this Period

-2700

Reattribution from spouse

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
David G. Bunning

Mailing Address 225 E Deerpath
Suite 210

City	State	Zip Code
Lake Forest	IL	60045-5302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2015

Transaction ID : A-CF36556

Amount of Each Receipt this Period

1000

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

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

6400.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Dean R. Bymers

Mailing Address PO Box 68

City

Raymond

State

SD

Zip Code

57258-0068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

415

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36728

Amount of Each Receipt this Period

40

Full Name (Last, First, Middle Initial)

B. Jennifer L. Case

Mailing Address 4727 Oporto Place

City

San Diego

State

CA

Zip Code

92124-2448

FEC ID number of contributing
federal political committee.

C

Name of Employer

New Leaf Biofuels

Occupation

Chief Executive Officer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2015

Transaction ID : A-CF37083

Amount of Each Receipt this Period

350

Full Name (Last, First, Middle Initial)

C. Kirsten Chadwick

Mailing Address 601 President Ford Lane

City

Alexandria

State

VA

Zip Code

22302-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fierce Government Relations

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37159

Amount of Each Receipt this Period

500

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

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

890.00

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

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Phillip Chase

Mailing Address 5374 Long Shadow Court

City

Westlake Village

State

CA

Zip Code

91362-5223

FEC ID number of contributing federal political committee.

C

Name of Employer

The Chase Group

Occupation

Hospital Administration

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36953

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Aaron Cohen

Mailing Address 1110 Trinity Drive

City

Alexandria

State

VA

Zip Code

22314-4722

FEC ID number of contributing federal political committee.

C

Name of Employer

Capitol Counsel LLC

Occupation

Principal

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : A-CF37017

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

John M. Corothers USN (Ret)

Mailing Address 47617 181st Street

City

Clear Lake

State

SD

Zip Code

57226-5402

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

285

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Transaction ID : A-CF36840

Amount of Each Receipt this Period

50

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

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

1050.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Charles E. Dana

A.

Mailing Address 12 Colony Lane

City

Cleveland

State

OH

Zip Code

44108-1180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36959

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Glen N. Davis

B.

Mailing Address PO Box 241

City

De Smet

State

SD

Zip Code

57231-0241

FEC ID number of contributing
federal political committee.

C

Name of Employer
Legend SeedsOccupation
Seed Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37213

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

James T. Demetriades

C.

Mailing Address 1499 Blueridge Drive

City

Beverly Hills

State

CA

Zip Code

90210-2209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Multiversal EnterprisesOccupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36885

Amount of Each Receipt this Period

1000

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

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

2500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Timothy Donohue**A.**

Mailing Address 2205 S Judy Avenue

City

Sioux Falls

State

SD

Zip Code

57103-6358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Williams Insurance Agency

Occupation

Sales

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : A-CF37189

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Benjamin T. Doughty**B.**

Mailing Address 2705 Cameron Drive

City

Rapid City

State

SD

Zip Code

57702-5284

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

275

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36665

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

David L. Elson**C.**

Mailing Address 513 E Plum Creek Road

City

Sioux Falls

State

SD

Zip Code

57105-6950

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Health

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36627

Amount of Each Receipt this Period

250

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

550.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Timothy Engel

Mailing Address 2606 Whispering Shores Drive

City State Zip Code
Fort Pierre SD 57532-2407

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

Name of Employer Occupation
May, Adam, Gerdes & Thompson LLP Attorney

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : A-CF37148

Amount of Each Receipt this Period

250

B. Full Name (Last, First, Middle Initial)
Kurt V. Feaster

Mailing Address 720 E Tomar Court

City State Zip Code
Sioux Falls SD 57105-7021

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

Name of Employer Occupation
Renew Energy Investor

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36960

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Gary R. Fish

Mailing Address 1401 S Parkview Place

City State Zip Code
Brandon SD 57005-2170

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

Name of Employer Occupation
Renew Energy Maintenance CFO

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36961

Amount of Each Receipt this Period

300

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

1050.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Bradford M. Freeman

Mailing Address 11100 Santa Monica Boulevard

Suite 1900

City

Los Angeles

State

CA

Zip Code

90025-0525

FEC ID number of contributing
federal political committee.

C

Name of Employer
Freeman, Spogli & Co.Occupation
Investment Banker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36913

Amount of Each Receipt this Period

2700

Full Name (Last, First, Middle Initial)

Christopher Gaddie

Mailing Address 615 Acker Place NE

City

Washington

State

DC

Zip Code

20002-5211

FEC ID number of contributing
federal political committee.

C

Name of Employer
KMG HoldingsOccupation
Director of Public Affairs

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		30		2015

Transaction ID : A-CF37163

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Joan George

Mailing Address PO Box 128

City

Hill City

State

SD

Zip Code

57745-0128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rafter J Bar RanchOccupation
Rancher

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Transaction ID : A-CF36932

Amount of Each Receipt this Period

1000

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

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

4200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Todd George

Mailing Address 320 E Enchanted Pines Drive

City State Zip Code
Rapid City SD 57701-7753

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

Name of Employer Occupation
Self-Employed Rafter J Bar Ranch Campground

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	05	2015

Transaction ID : A-CF37033

Amount of Each Receipt this Period

2000

B. Full Name (Last, First, Middle Initial)
Patricia K. Giebink

Mailing Address 121 S Allcott Street

City State Zip Code
Chamberlain SD 57325-1757

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

Name of Employer Occupation
Self-Employed Medical Doctor

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
300

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	31	2015

Transaction ID : A-CF37169

Amount of Each Receipt this Period

100

C. Full Name (Last, First, Middle Initial)
Cynthia Gilbert

Mailing Address 9665 Wilshire Boulevard
Suite 801

City State Zip Code
Beverly Hills CA 90212-2315

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
500

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
11	15	2015

Transaction ID : A-CF36886

Amount of Each Receipt this Period

500

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

2600.00

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

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

FOR LINE NUMBER:

PAGE 20 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Patricia L. Glaser

A.

Mailing Address 10250 Constellation Boulevard
Floor 19

City	State	Zip Code
Los Angeles	CA	90067-6219

FEC ID number of contributing
federal political committee.

C

Name of Employer
Glaser Weil

Occupation
Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36887

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Richard H Goebel

B.

Mailing Address PO Box 1117

City	State	Zip Code
Spearfish	SD	57783-7117

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

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : A-CF37177

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Charles F. Gorder Sr.

C.

Mailing Address 5526 Toyon Road

City	State	Zip Code
San Diego	CA	92115-1020

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

1350

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2015

Transaction ID : A-CF36824

Amount of Each Receipt this Period

300

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

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

900.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Mark S. Graham

Mailing Address 4 S Pintail Place

City

Sioux Falls

State

SD

Zip Code

57105-0151

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

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : A-CF37110

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

Jeff M. Hall

Mailing Address 38846 124th Street

City

Aberdeen

State

SD

Zip Code

57401-8141

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer/Sand/Gravel Producer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37164

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Mary HartMailing Address 9440 Santa Monica Boulevard
Suite 407

City

Beverly Hills

State

CA

Zip Code

90210-4607

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

2692.3

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : A-IF36940

Amount of Each Receipt this Period

1442.3

Inkind: Food/Beverage/Parking Service

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

3942.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Mary HartMailing Address 9440 Santa Monica Boulevard
Suite 407

City	State	Zip Code
Beverly Hills	CA	90210-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2692.3

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2015

Transaction ID : A-CF36955

Amount of Each Receipt this Period

1250

Full Name (Last, First, Middle Initial)

Bret Healy

Mailing Address PO Box 731

City	State	Zip Code
Chamberlain	SD	57325-0731

FEC ID number of contributing
federal political committee.

C

Name of Employer
River Bluffs StrategiesOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36964

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

Edward J. Hegland

Mailing Address 3290 Highway 119

City	State	Zip Code
Appleton	MN	56208-2421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2015

Transaction ID : A-CF37147

Amount of Each Receipt this Period

250

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

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

3000.00

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

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

FOR LINE NUMBER:

PAGE 23 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Tyler Henritze

Mailing Address 451 W Broadway

Apt. 2N

City

New York

State

NY

Zip Code

10012-5300

FEC ID number of contributing federal political committee.

C

Name of Employer

Blackstone

Occupation

Real Estate

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36582

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Sharon Hernandez

Mailing Address 5325 S Soto Street

City

Vernon

State

CA

Zip Code

90058-3624

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

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36888

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Irving A. Hinderaker

Mailing Address 500 16th Avenue NE

Apt. 21

City

Watertown

State

SD

Zip Code

57201-8699

FEC ID number of contributing federal political committee.

C

Name of Employer

Austin Hinderaker

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36734

Amount of Each Receipt this Period

250

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

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

2250.00

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

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

FOR LINE NUMBER:

PAGE 24 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Frederick E. Hitchcock

A.

Mailing Address 9101 Alta Drive

Unit 1702

City

Las Vegas

State

NV

Zip Code

89145-8545

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hitchcock Automotive Resourc

Occupation

Auto Dealer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36900

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Theodore J. Hofer

B.

Mailing Address PO Box 331

City

Bridgewater

State

SD

Zip Code

57319-0331

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

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36630

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Philip N. Hogen

C.

Mailing Address 1295 Bandana Boulevard N

Office BLDG

City

Saint Paul

State

MN

Zip Code

55108-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

228.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37168

Amount of Each Receipt this Period

123.45

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

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

1223.45

**SCHEDULE A (FEC Form 3)
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Daniel C. Holland

Mailing Address 378 Wildflower Road

City

Yankton

State

SD

Zip Code

57078-6770

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

900

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : A-CF36787

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

LaVonne Horn

Mailing Address 955 Park Avenue

City

Custer

State

SD

Zip Code

57730-3301

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

225

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37214

Amount of Each Receipt this Period

75

Full Name (Last, First, Middle Initial)

Leila L. Joyce

Mailing Address 12781 White Tail Road

City

Custer

State

SD

Zip Code

57730-8324

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

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36672

Amount of Each Receipt this Period

100

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

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

275.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Verle W. Jucht**A.**

Mailing Address 25875 475th Avenue

City

Renner

State

SD

Zip Code

57055-6505

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

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2015

Transaction ID : A-CF36790

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Martin A. Katz**B.**Mailing Address 9538 Brighton Way
Suite 201

City

Beverly Hills

State

CA

Zip Code

90210-4528

FEC ID number of contributing
federal political committee.

C

Name of Employer

Martin Katz Ltd

Occupation

President & CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36889

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Dwayne Klarenbeek**C.**

Mailing Address 3905 S Mesquite Avenue

City

Sioux Falls

State

SD

Zip Code

57110-4310

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwestern Mechanical Inc.

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		08		2015

Transaction ID : A-CF36834

Amount of Each Receipt this Period

500

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

1100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Brett Koenecke

Mailing Address 503 S Pierre Street

City

Pierre

State

SD

Zip Code

57501-4522

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		17		2015

Transaction ID : A-CF37116

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Joseph D. Kruse

Mailing Address 609 E Saint Andrews Circle

City

North Sioux City

State

SD

Zip Code

57049-5133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kruse Financial

Occupation

Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

0

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36965

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

Irene F. Kurtenbach

Mailing Address 47209 220th Street

City

Brookings

State

SD

Zip Code

57006-7112

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Transaction ID : A-CF36654

Amount of Each Receipt this Period

1000

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

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

2750.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Ken Larsen

Mailing Address 13733 47th Avenue W

City

Rapid City

State

SD

Zip Code

57702-6524

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

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : A-CF37112

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Ken Larsen

Mailing Address 13733 47th Avenue W

City

Rapid City

State

SD

Zip Code

57702-6524

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

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37180

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Herbert Alan Levin

Mailing Address 724 E Grinnell Drive

City

Burbank

State

CA

Zip Code

91501-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer

California DOJ

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36883

Amount of Each Receipt this Period

75

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

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

825.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Paul Jay Lewis

Mailing Address 309 W 43rd Street

City State Zip Code
Sioux Falls SD 57105-6838

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

Name of Employer Occupation
PAL, Inc. Insurance

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2015

Transaction ID : A-CF36655

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
John E. Link

Mailing Address 12871 Greenwood Rd

City State Zip Code
Minong WI 54859

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

Name of Employer Occupation
Jack Links Beef Jerky CEO

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36766

Amount of Each Receipt this Period

2700

C. Full Name (Last, First, Middle Initial)
Troy J. Link

Mailing Address PO Box 579

City State Zip Code
Minong WI 54859-0579

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

Name of Employer Occupation
Jack Link's Beef Jerky President

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36772

Amount of Each Receipt this Period

2700

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

6400.00

**SCHEDULE A (FEC Form 3)
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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Elizabeth H. Lowe

Mailing Address 709 Latimer Road

City

Santa Monica

State

CA

Zip Code

90402-1015

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lowe Enterprises Inc.Occupation
Executive

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2015

Transaction ID : A-CF36877

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Harold Matzner

Mailing Address 555 N Patencio Road

City

Palm Springs

State

CA

Zip Code

92262-4353

FEC ID number of contributing
federal political committee.

C

Name of Employer
CBAOccupation
Chairman/CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2015

Transaction ID : A-CF36878

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Matthew S. McCaulley

Mailing Address 1508 W 71st Street

City

Sioux Falls

State

SD

Zip Code

57108-3223

FEC ID number of contributing
federal political committee.

C

Name of Employer
Redstone Law Firm LLPOccupation
Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2015

Transaction ID : A-CF36978

Amount of Each Receipt this Period

1500

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

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

3500.00

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Melbourne K. McCrea

Mailing Address 47148 145th Street

City State Zip Code
Twin Brooks SD 57269-5325

FEC ID number of contributing
federal political committee.

C

Name of Employer
Administrative Support ServicesOccupation
Management

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

375

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37218

Amount of Each Receipt this Period

100

B. Full Name (Last, First, Middle Initial)
Michael S. Meldman

Mailing Address 14605 N 73rd Street

City State Zip Code
Scottsdale AZ 85260-3105

FEC ID number of contributing
federal political committee.

C

Name of Employer
Discovery Land Co.Occupation
CEO & Founder

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		13		2015

Transaction ID : A-CF36879

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Robert J. Metz

Mailing Address 46602 127th Street

City State Zip Code
Browns Valley MN 56219-4028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : A-CF37054

Amount of Each Receipt this Period

250

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

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

850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Richard S. Morrison

Mailing Address PO Box 675

City Ashtabula	State OH	Zip Code 44005-0675
-------------------	-------------	------------------------

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

Name of Employer Molded Fiber Glass Companies	Occupation President & CEO
--------------------------------------------------	-------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : A-CF37020

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Richard Muth

Mailing Address 1800 N Ridge Road

City Mitchell	State SD	Zip Code 57301-1569
------------------	-------------	------------------------

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

Name of Employer Muth Electric, Inc.	Occupation Electrical Contractor
-----------------------------------------	-------------------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2015

Transaction ID : A-CF36792

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Kyle Nevins

Mailing Address 1325 D Street NE

City Washington	State DC	Zip Code 20002-5427
--------------------	-------------	------------------------

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

Name of Employer Harbinger Strategies LLC	Occupation Consultant
----------------------------------------------	--------------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36581

Amount of Each Receipt this Period

2000

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

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

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Greg Nickerson

Mailing Address 11215 Marwood Hill Drive

City

Potomac

State

MD

Zip Code

20854-1241

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington Tax Group

Occupation

Consultant

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		14		2015

Transaction ID : A-CF36559

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Michael L. Noble

Mailing Address 4818 N Wayside Drive

City

Erie

State

PA

Zip Code

16505-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hero BX

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		15		2015

Transaction ID : A-CF37096

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Sharon Noem

Mailing Address 44557 192nd Street

City

Lake Norden

State

SD

Zip Code

57248-5800

FEC ID number of contributing
federal political committee.

C

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36675

Amount of Each Receipt this Period

750

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

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

2250.00

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

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

FOR LINE NUMBER:

PAGE 34 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Larry D. Nupen

Mailing Address 613 N 2nd Street

City

Aberdeen

State

SD

Zip Code

57401-2712

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

240

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36676

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

Kristine Kreiter O'Connell

Mailing Address 2421 E Stanton Drive

City

Sioux Falls

State

SD

Zip Code

57103-4708

FEC ID number of contributing
federal political committee.

C

Name of Employer

Woods Fuller Shultz Smith

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : A-CF37056

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Robert K. OBrien

Mailing Address 11570 Rosedale Road

City

Mechanicsburg

State

OH

Zip Code

43044-9521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2015

Transaction ID : A-CF36796

Amount of Each Receipt this Period

100

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

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

650.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Robert K. OBrien

Mailing Address 11570 Rosedale Road

City

Mechanicsburg

State

OH

Zip Code

43044-9521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2015

Transaction ID : A-CF37032

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Robert K. OBrien

Mailing Address 11570 Rosedale Road

City

Mechanicsburg

State

OH

Zip Code

43044-9521

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Insurance Agent

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : A-CF37166

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Lorelii Odland

Mailing Address 1324 N Washington Street

City

Aberdeen

State

SD

Zip Code

57401-2059

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

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36739

Amount of Each Receipt this Period

100

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

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

300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 166

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Sandy Ogg

Mailing Address **345 Park Avenue**
Floor 44

City **New York** State **NY** Zip Code **10154-0004**

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

Name of Employer **Blackstone** Occupation **Operating Partner**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36580

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
David Olander

Mailing Address **2944 Bridgehampton Court**

City **Falls Church** State **VA** Zip Code **22042-4481**

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

Name of Employer **Capitol Counsel LLC** Occupation **Attorney**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		02		2015

Transaction ID : A-CF37016

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
Richard R. Olander

Mailing Address **1742 N Fitzgerald Lane**

City **Hanford** State **CA** Zip Code **93230-7901**

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 **640**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Transaction ID : A-CF36850

Amount of Each Receipt this Period

200

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

1700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Kenneth W. Olson Jr.**A.**

Mailing Address 1425 18th Avenue NE

City

Aberdeen

State

SD

Zip Code

57401-1500

FEC ID number of contributing
federal political committee.

C

Name of Employer

K. Olson, Inc.

Occupation

Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

625

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36740

Amount of Each Receipt this Period

150

Full Name (Last, First, Middle Initial)

Betty ONeill**B.**Mailing Address 821 Fox Run Drive
Apt. 305

City

Rapid City

State

SD

Zip Code

57701-2376

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

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		28		2015

Transaction ID : A-CF37152

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

John Oneill**C.**

Mailing Address 1749 Seaton Street NW

City

Washington

State

DC

Zip Code

20009-2625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Harbinger Strategies

Occupation

Attorney

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2015

Transaction ID : A-CF36576

Amount of Each Receipt this Period

2000

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

2200.00

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

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

FOR LINE NUMBER:

PAGE 38 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Joy Osborne

Mailing Address 19456 Ventura Boulevard

City

Tarzana

State

CA

Zip Code

91356-3091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Investors Management

Occupation

Investor

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : A-CF36903

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Horst Osterkamp

Mailing Address 215 Ashdale Place

City

Los Angeles

State

CA

Zip Code

90049-2407

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

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : A-CF36904

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Evelyn J. Pederson

Mailing Address 47468 280th Street

City

Worthing

State

SD

Zip Code

57077-5738

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

770

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		19		2015

Transaction ID : A-CF36902

Amount of Each Receipt this Period

200

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

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

1700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Leroy Pietz

Mailing Address 41115 284th Street

City

Tripp

State

SD

Zip Code

57376-6303

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

255

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36678

Amount of Each Receipt this Period

95

Full Name (Last, First, Middle Initial)

Carol Pollard

Mailing Address 1625 Northridge Drive

Unit 211

City

Watertown

State

SD

Zip Code

57201-8695

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

350

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36679

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

James A. Power

Mailing Address 904 W Eagle Ridge Street

City

Sioux Falls

State

SD

Zip Code

57108-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37081

Amount of Each Receipt this Period

150

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

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

345.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 40 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Tony Pritzker

Mailing Address 11111 Santa Monica Boulevard

Suite 1650

City

Los Angeles

State

CA

Zip Code

90025-3350

FEC ID number of contributing federal political committee.

C

Name of Employer

Pritzker Group

Occupation

Managing Partner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36890

Amount of Each Receipt this Period

2700

Full Name (Last, First, Middle Initial)

Andrew F. Puzder

Mailing Address 570 Meadow Wood Lane

City

Santa Barbara

State

CA

Zip Code

93108-2027

FEC ID number of contributing federal political committee.

C

Name of Employer

CKE Restaurants, Inc.

Occupation

CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36798

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Edward M. Randazzo

Mailing Address 516 E Tallent Street

City

Rapid City

State

SD

Zip Code

57701-5733

FEC ID number of contributing federal political committee.

C

Name of Employer

Family Heritage Alliance

Occupation

Public Policy Analyst

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37173

Amount of Each Receipt this Period

50

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

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

3750.00

Diagram illustrating the layout of the 15 numbered boxes on the page:

- Row 1: 11a, 11b, 11c, 11d, 15
- Row 2: 12, 13a, 13b, 14, 15

Box 11a is marked with an 'X'.

NAME OF COMMITTEE (In Full)
Kristi for Congress

Transaction ID : A-CF36583

1000

Transaction ID : A-CF36905

A horizontal number line with 10 equal segments. The rightmost segment is labeled '500'.

A horizontal number line with tick marks every 100 units. The number 1000 is labeled at the 10th tick mark from the left.

Transaction ID : A-CF36949

1000

2500.00

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

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

FOR LINE NUMBER:

PAGE 42 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Eldon Roth

Mailing Address 235 La Costa Lane

City

Dakota Dunes

State

SD

Zip Code

57049-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer

BPI Technology

Occupation

Self-Employed

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2015

Transaction ID : A-CF37146

Amount of Each Receipt this Period

1000

Reattribution/Redesignation requested

Full Name (Last, First, Middle Initial)

Eldon Roth

Mailing Address 235 La Costa Lane

City

Dakota Dunes

State

SD

Zip Code

57049-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer

BPI Technology

Occupation

Self-Employed

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-MCNF731

Amount of Each Receipt this Period

-800

Redesignation from primary

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Eldon Roth

Mailing Address 235 La Costa Lane

City

Dakota Dunes

State

SD

Zip Code

57049-4125

FEC ID number of contributing
federal political committee.

C

Name of Employer

BPI Technology

Occupation

Self-Employed

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-MCNF732

Amount of Each Receipt this Period

800

Redesignation to general

[MEMO ITEM]

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

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 43 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Lee Samson

Mailing Address 9200 W Sunset Boulevard
Penthouse 7

City	State	Zip Code
West Hollywood	CA	90069-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer
SNF ManagementOccupation
Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36899

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B. Rodney J. Sather

Mailing Address 29574 239th Street

City	State	Zip Code
Vivian	SD	57576-5317

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-EmployedOccupation
Agriculture

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		08		2015

Transaction ID : A-CF36835

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. Thomas E. Saunders

Mailing Address 2103 Sapphire Court

City	State	Zip Code
Aberdeen	SD	57401-7389

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36641

Amount of Each Receipt this Period

100

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

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

2100.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Frederick W. Schaffer**A.**

Mailing Address 411 N 6th Street

3877

City

Emery

State

SD

Zip Code

57332-2124

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

475

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		09		2015

Transaction ID : A-CF36854

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

Frederick W. Schaffer**B.**

Mailing Address 411 N 6th Street

3877

City

Emery

State

SD

Zip Code

57332-2124

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

475

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		29		2015

Transaction ID : A-CF37184

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

James A. Schmidt**C.**

Mailing Address PO Box 134

City

Kennebec

State

SD

Zip Code

57544-0134

FEC ID number of contributing
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36680

Amount of Each Receipt this Period

50

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

200.00

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

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Christine Hearst Schwarzman

Mailing Address 345 Park Avenue

Floor 44

City

New York

State

NY

Zip Code

10154-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2015

Transaction ID : A-CF36585

Amount of Each Receipt this Period

2700

Full Name (Last, First, Middle Initial)

Christine Hearst Schwarzman

Mailing Address 345 Park Avenue

Floor 44

City

New York

State

NY

Zip Code

10154-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36579

Amount of Each Receipt this Period

2700

Reattribution/Redesignation requested

Full Name (Last, First, Middle Initial)

Christine Hearst Schwarzman

Mailing Address 345 Park Avenue

Floor 44

City

New York

State

NY

Zip Code

10154-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF725

Amount of Each Receipt this Period

-2700

Redesignation from primary

[MEMO ITEM]

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

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

5400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 46 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Christine Hearst Schwarzman

Mailing Address 345 Park Avenue

Floor 44

City

New York

State

NY

Zip Code

10154-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Lawyer

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF726

Amount of Each Receipt this Period

2700

Redesignation to general

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Steven Scott

Mailing Address 3618 Edgewater Drive

City

Gary

State

SD

Zip Code

57237-5525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Duke Energy Renewables

Occupation

General Manager - Wind

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		27		2015

Transaction ID : A-CF36577

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Harry Sloan

Mailing Address 2121 Avenue Of The Stars

Suite 2300

City

Los Angeles

State

CA

Zip Code

90067-5047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Global Eagle Holdings, LLC

Occupation

CEO

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Transaction ID : A-CF36934

Amount of Each Receipt this Period

500

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

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

750.00

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

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Justin G. Smith

Mailing Address 1701 E Ash Grove Circle

City

Sioux Falls

State

SD

Zip Code

57108-4722

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37082

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Wendy Lantis Soulek

Mailing Address PO Box 699

City

Spearfish

State

SD

Zip Code

57783-0699

FEC ID number of contributing
federal political committee.

C

Name of Employer
Priority Co.Occupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		13		2015

Transaction ID : A-CF36558

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

Wendy Lantis Soulek

Mailing Address PO Box 699

City

Spearfish

State

SD

Zip Code

57783-0699

FEC ID number of contributing
federal political committee.

C

Name of Employer
Priority Co.Occupation
President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36635

Amount of Each Receipt this Period

50

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

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

350.00

SCHEDULE A (FEC Form 3) **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 checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Wendy Lantis Soulek

A.

Mailing Address PO Box 699

City

Spearfish

State

SD

Zip Code

57783-0699

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priority Co.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		09		2015

Transaction ID : A-CF36849

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

Wendy Lantis Soulek

B.

Mailing Address PO Box 699

City

Spearfish

State

SD

Zip Code

57783-0699

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priority Co.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36966

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

Wendy Lantis Soulek

C.

Mailing Address PO Box 699

City

Spearfish

State

SD

Zip Code

57783-0699

FEC ID number of contributing
federal political committee.

C

Name of Employer

Priority Co.

Occupation

President

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		08		2015

Transaction ID : A-CF37053

Amount of Each Receipt this Period

50

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

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

150.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City State Zip Code
Spearfish SD 57783-0699

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

Name of Employer Occupation
Priority Co. President

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		23		2015

Transaction ID : A-CF37144

Amount of Each Receipt this Period

50

B. Full Name (Last, First, Middle Initial)
Wendy Lantis Soulek

Mailing Address PO Box 699

City State Zip Code
Spearfish SD 57783-0699

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

Name of Employer Occupation
Priority Co. President

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2550

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37216

Amount of Each Receipt this Period

50

C. Full Name (Last, First, Middle Initial)
Susan L. Spanos

Mailing Address 7505 Hillside Drive

City State Zip Code
La Jolla CA 92037-3941

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
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		13		2015

Transaction ID : A-CF36882

Amount of Each Receipt this Period

500

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

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Shimon A. Stein

Mailing Address 2122 Massachusetts Avenue NW
Apt. 614

City Washington State DC Zip Code 20008-2830

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

Name of Employer West Front Strategies LLC Occupation Lobbyist

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36578

Amount of Each Receipt this Period

500

B. Full Name (Last, First, Middle Initial)
Eva S. Stern

Mailing Address 23700 Malibu Colony Road

City Malibu State CA Zip Code 90265-6629

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

Name of Employer Self-Employed Occupation Clinical Social Worker

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2015

Transaction ID : A-CF36891

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Steven C. Stombres

Mailing Address 10092 Daniels Run Way

City Fairfax State VA Zip Code 22030-2448

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

Name of Employer Harbinger Strategies Occupation Partner

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36970

Amount of Each Receipt this Period

1500

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

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Margaret E. Stout

Mailing Address 2802 Dunes Drive

City

Fort Pierre

State

SD

Zip Code

57532-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prairie Pages Bookseller

Occupation

Business Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2015

Transaction ID : A-CF36751

Amount of Each Receipt this Period

1500

Reattribution/Redesignation requested

Full Name (Last, First, Middle Initial)

Margaret E. Stout

Mailing Address 2802 Dunes Drive

City

Fort Pierre

State

SD

Zip Code

57532-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prairie Pages Bookseller

Occupation

Business Owner

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF727

Amount of Each Receipt this Period

-800

Reattribution from spouse

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

Stephen Y. Stout

Mailing Address 2802 Dunes Drive

City

Fort Pierre

State

SD

Zip Code

57532-2267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Avera Medical Assoc Clinic

Occupation

Orthopedic Surgeon

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

800

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-MCNF728

Amount of Each Receipt this Period

800

Reattribution to spouse

[MEMO ITEM]

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

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

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Douglas K. Styron

Mailing Address 1504 St Lawrence Street

City State Zip Code
Orlando FL 32818-5712

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36778

Amount of Each Receipt this Period

100

B. Full Name (Last, First, Middle Initial)
Burt Sugarman

Mailing Address 9440 Santa Monica Boulevard
Suite 407

City State Zip Code
Beverly Hills CA 90210-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Giant Group Ltd.Occupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2692.3

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : A-IF36941

Amount of Each Receipt this Period

1442.3

Inkind: Food/Beverage/Parking Service

C. Full Name (Last, First, Middle Initial)
Burt Sugarman

Mailing Address 9440 Santa Monica Boulevard
Suite 407

City State Zip Code
Beverly Hills CA 90210-4607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Giant Group Ltd.Occupation
CEO

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2692.3

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2015

Transaction ID : A-CF36954

Amount of Each Receipt this Period

1250

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

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

2792.30

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 53 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Randy SugarmanMailing Address 11845 W Olympic Boulevard
112 SW

City	State	Zip Code
Los Angeles	CA	90064-1149

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schur & Sugarman CPAsOccupation
CPA

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36898

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Bobby SyedMailing Address 150 S Rodeo Drive
Suite 100

City	State	Zip Code
Beverly Hills	CA	90212-2411

FEC ID number of contributing
federal political committee.

C

Name of Employer
John Aaroe GroupOccupation
Estates Director

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		01		2015

Transaction ID : A-CF36983

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Elena Tompkins

Mailing Address 3042 Dent Place NW

City	State	Zip Code
Washington	DC	20007-2915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tompkins Strategies LLCOccupation
Lobbyist

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		08		2015

Transaction ID : A-CF37086

Amount of Each Receipt this Period

500

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

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

2500.00

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

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

FOR LINE NUMBER:

PAGE 54 OF 166

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Yuri Vanetik

Mailing Address 8502 E Chapman Avenue
Suite 609

City	State	Zip Code
Orange	CA	92869-2461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanetik International, LLC

Occupation
Chairman

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		01		2015

Transaction ID : A-CF36982

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

Rosalyn Veldhuizen

Mailing Address 7109 S Edinburg Place

City	State	Zip Code
Sioux Falls	SD	57108-9401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		26		2015

Transaction ID : A-CF36647

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

Deborah Walsh

Mailing Address 1 W Century Drive
Unit 28D

City	State	Zip Code
Los Angeles	CA	90067-3412

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Geographic

Occupation
Marketing Director

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		19		2015

Transaction ID : A-CF36906

Amount of Each Receipt this Period

500

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

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

1250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Richard W. Westhoff

Mailing Address **PO Box 1332**

City **Sioux Falls** State **SD** Zip Code **57101-1332**

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

Name of Employer **Eide Bailly** Occupation **CPA**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **300**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37226

Amount of Each Receipt this Period

100

B. Full Name (Last, First, Middle Initial)
Bruce D. Wintle

Mailing Address **41145 214th Street**

City **Iroquois** State **SD** Zip Code **57353-7726**

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

Name of Employer **Self-Employed** Occupation **Livestock Producers**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **700**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36688

Amount of Each Receipt this Period

100

C. Full Name (Last, First, Middle Initial)
Rod Woodruff

Mailing Address **20622 131st Avenue**

City **Sturgis** State **SD** Zip Code **57785-6628**

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

Name of Employer **Sturgis Buffalo Chip** Occupation **Self-Employed**

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37190

Amount of Each Receipt this Period

1000

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

1200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Ben T. Wootton

Mailing Address 2290 Lambs Gap Road

City

Enola

State

PA

Zip Code

17025-1123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2015

Transaction ID : A-CF36972

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

B. 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 M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. 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 M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

101693.05

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Aircraft Owners And Pilots Association PAC

Mailing Address 421 Aviation Way

City

Frederick

State

MD

Zip Code

21701-4756

FEC ID number of contributing
federal political committee.

C C00131185

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37060

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B. Amazon PAC

Mailing Address 601 New Jersey Ave., NW
Suite 900

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00360354

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37229

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW
Suite 600

City

Washington

State

DC

Zip Code

20036-3971

FEC ID number of contributing
federal political committee.

C C00004275

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37127

Amount of Each Receipt this Period

2000

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

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

4000.00

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. American College of Physician Services Inc PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 700

City	State	Zip Code
Washington	DC	20001-7401

FEC ID number of contributing federal political committee.

C C00403881

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36989

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

B. American College of Radiology Association PAC

Mailing Address 1891 Preston White Drive

City	State	Zip Code
Reston	VA	20191-4326

FEC ID number of contributing federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

7000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37122

Amount of Each Receipt this Period

4000

Full Name (Last, First, Middle Initial)

C. American College of Radiology Association PAC

Mailing Address 1891 Preston White Drive

City	State	Zip Code
Reston	VA	20191-4326

FEC ID number of contributing federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37224

Amount of Each Receipt this Period

2000

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

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

7000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. American College of Surgeons Professional Association PAC

Mailing Address 20 F Street NW

Suite 1000

City

Washington

State

DC

Zip Code

20001-6701

FEC ID number of contributing
federal political committee.**C** C00382424

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37228

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

B. American Council Of Engineering Companies ACEC PAC

Mailing Address 1015 15th Street NW

Suite 802

City

Washington

State

DC

Zip Code

20005-2605

FEC ID number of contributing
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37058

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

C. American Council Of Engineering Companies ACEC PAC

Mailing Address 1015 15th Street NW

Suite 802

City

Washington

State

DC

Zip Code

20005-2605

FEC ID number of contributing
federal political committee.**C** C00010868

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37121

Amount of Each Receipt this Period

1500

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

5500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
American Financial Services Association PAC

Mailing Address 919 18th Street NW

City	State	Zip Code
Washington	DC	20006-5519

FEC ID number of contributing
federal political committee.**C** C00038604

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37123

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
American Optometric Association PACMailing Address 1505 Prince Street
Suite 300

City	State	Zip Code
Alexandria	VA	22314-2874

FEC ID number of contributing
federal political committee.**C** C00024968

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37125

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
American Petroleum Institute PAC

Mailing Address 1220 L Street NW

City	State	Zip Code
Washington	DC	20005-4018

FEC ID number of contributing
federal political committee.**C** C00483677

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36992

Amount of Each Receipt this Period

1500

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
American Psychological Association Practice Organization PACMailing Address 228 S Washington Street
Suite 115

City	State	Zip Code
Alexandria	VA	22314-5404

FEC ID number of contributing
federal political committee. **C** C00522094

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37061

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
American Society of Association Executives PAC

Mailing Address 1575 I Street NW

City	State	Zip Code
Washington	DC	20005-1105

FEC ID number of contributing
federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)Election Cycle-to-Date
3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37126

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
American Soybean Association PACMailing Address 12125 Wodcrst Exe Drive
Suite 100

City	State	Zip Code
Saint Louis	MO	63141-5009

FEC ID number of contributing
federal political committee. **C** C00408468

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
4500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36991

Amount of Each Receipt this Period

2500

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

6500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
American Wind Energy Association WindPACMailing Address 1501 M Street NW
Floor 10City State Zip Code
Washington DC 20005-1700FEC ID number of contributing
federal political committee.**C** C00259572

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M / D D / Y Y Y Y
11 30 2015**Transaction ID : A-CF37013**

Amount of Each Receipt this Period

5000

B. Full Name (Last, First, Middle Initial)
Americas Health Insurance Plans PACMailing Address 601 Pennsylvania Ave NW
South Building, Suite 500City State Zip Code
Washington DC 20004FEC ID number of contributing
federal political committee.**C** C00106740

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M / D D / Y Y Y Y
12 22 2015**Transaction ID : A-CF37124**

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
Amgen PAC

Mailing Address 1 Amgen Center Drive

City State Zip Code
Newbury Park CA 91320-1730FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

6000

Date of Receipt

M M / D D / Y Y Y Y
12 09 2015**Transaction ID : A-CF37059**

Amount of Each Receipt this Period

2500

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

9000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Amgen PAC

Mailing Address 1 Amgen Center Drive

City

Newbury Park

State

CA

Zip Code

91320-1730

FEC ID number of contributing
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

6000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		16		2015

Transaction ID : A-CF37098

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Archer Daniels Midland Company PAC

Mailing Address PO Box 1470

City

Decatur

State

IL

Zip Code

62525-1820

FEC ID number of contributing
federal political committee.**C** C00093963

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36990

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

AT&T Inc. Federal PACMailing Address 208 S Akard Street
Front 2701

City

Dallas

State

TX

Zip Code

75202-4295

FEC ID number of contributing
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

4000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36907

Amount of Each Receipt this Period

2000

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

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
BAE Systems USA Inc. PAC

Mailing Address 1101 Wilson Boulevard

City State Zip Code
Arlington VA 22209-2211

FEC ID number of contributing
federal political committee.**C** C00281212

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37062

Amount of Each Receipt this Period

1500

B. Full Name (Last, First, Middle Initial)
BluePAC - Blue Cross Blue Shield Association PAC

Mailing Address 1310 G Street NW

City State Zip Code
Washington DC 20005-3000

FEC ID number of contributing
federal political committee.**C** C00194746

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36908

Amount of Each Receipt this Period

500

C. Full Name (Last, First, Middle Initial)
BluePAC - Blue Cross Blue Shield Association PAC

Mailing Address 1310 G Street NW

City State Zip Code
Washington DC 20005-3000

FEC ID number of contributing
federal political committee.**C** C00194746

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36909

Amount of Each Receipt this Period

2000

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

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
BNSF Railway Company PAC

Mailing Address PO Box 961039

City	State	Zip Code
Fort Worth	TX	76161-0039

FEC ID number of contributing
federal political committee.**C** C00235739

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37128

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Boston Scientific Corporation PAC

Mailing Address 300 Boston Scientific Way

City	State	Zip Code
Marlborough	MA	01752-1234

FEC ID number of contributing
federal political committee.**C** C00357863

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37230

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
Bryan Cave LLP PACMailing Address 1155 F Street NW
Suite 700

City	State	Zip Code
Washington	DC	20004-1312

FEC ID number of contributing
federal political committee.**C** C00332643

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36993

Amount of Each Receipt this Period

1000

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

5000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Caterpillar Employees PAC

Mailing Address 100 NE Adams Street

City State Zip Code
Peoria IL 61629-0001

FEC ID number of contributing
federal political committee.**C** C00148031

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37063

Amount of Each Receipt this Period

4000

B. Full Name (Last, First, Middle Initial)
Cathy McMorris Rodgers for Congress

Mailing Address PO Box 137

City State Zip Code
Spokane WA 99210-0137

FEC ID number of contributing
federal political committee.**C** C00390476

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

159.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2015

Transaction ID : A-IF37143

Amount of Each Receipt this Period

159.46

Inkind: Finance Consulting

C. Full Name (Last, First, Middle Initial)
CIGNA PAC

Mailing Address 1601 Chestnut Street
TL16B

City State Zip Code
Philadelphia PA 19192-0003

FEC ID number of contributing
federal political committee.**C** C00085316

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37064

Amount of Each Receipt this Period

2500

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

6659.46

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Citigroup Inc. PAC - FederalMailing Address 1101 Pennsylvania Avenue NW
Suite 1000

City	State	Zip Code
Washington	DC	20004-2524

FEC ID number of contributing
federal political committee.**C** C00008474

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		16		2015

Transaction ID : A-CF37099

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
CMR PAC

Mailing Address PO Box 2485

City	State	Zip Code
Springfield	VA	22152-0485

FEC ID number of contributing
federal political committee.**C** C00469429

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37231

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Comcast Corporation & NBC Universal PAC

Mailing Address 1701 John F Kennedy Boulevard

City	State	Zip Code
Philadelphia	PA	19103-2833

FEC ID number of contributing
federal political committee.**C** C00248716

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36994

Amount of Each Receipt this Period

2500

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

4500.00

SCHEDULE A (FEC Form 3) **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"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. CULAC The PAC of Credit Union National Association

Mailing Address 601 Pennsylvania Avenue NW
Suite 600

City	State	Zip Code
Washington	DC	20004-2601

FEC ID number of contributing federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

6000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36995

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

B. CULAC The PAC of Credit Union National Association

Mailing Address 601 Pennsylvania Avenue NW
Suite 600

City	State	Zip Code
Washington	DC	20004-2601

FEC ID number of contributing federal political committee.

C C00007880

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		07		2015

Transaction ID : A-CF37048

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

C. Ecolab Inc. PAC

Mailing Address 370 Wabasha Street N

City	State	Zip Code
Saint Paul	MN	55102-1323

FEC ID number of contributing federal political committee.

C C00101485

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		16		2015

Transaction ID : A-CF36910

Amount of Each Receipt this Period

2500

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

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Eli Lilly And Company PAC

Mailing Address Lilly Corporate Center

City State Zip Code
Indianapolis IN 46285-0001

FEC ID number of contributing
federal political committee.**C** C00082792

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : A-CF36997

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
ESOP Association PAC

Mailing Address 1726 M Street NW
Suite 501

City State Zip Code
Washington DC 20036-4522

FEC ID number of contributing
federal political committee.**C** C00196089

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	30	/	2015

Transaction ID : A-CF36998

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
Exxon Mobil PAC

Mailing Address 5959 Las Colinas Boulevard

City State Zip Code
Irving TX 75039-4202

FEC ID number of contributing
federal political committee.**C** C00095406

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2015

Transaction ID : A-CF36782

Amount of Each Receipt this Period

1500

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

5500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
General Motors Company PAC

Mailing Address 25 Massachusetts Avenue NW
Suite 400

City Washington State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2015

Transaction ID : A-CF36592

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Goodyear Good Government Fund

Mailing Address 1144 EAST MARKET STREET

City AKRON State OH Zip Code 44316

FEC ID number of contributing federal political committee. **C** C00100131

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37232

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Halliburton Company PAC

Mailing Address 1150 18th Street NW
Suite 200

City Washington State DC Zip Code 20036-3815

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF36999

Amount of Each Receipt this Period

1500

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

5000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Hewlett Packard Company PACMailing Address 709 G Street NW
Suite 300

City	State	Zip Code
Washington	DC	20001-3770

FEC ID number of contributing
federal political committee.**C** C00196725

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37129

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Hilton Worldwide PACMailing Address 7930 Jones Branch Drive
Suite 1100

City	State	Zip Code
McLean	VA	22102-3313

FEC ID number of contributing
federal political committee.**C** C00213074

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37000

Amount of Each Receipt this Period

2000

C. Full Name (Last, First, Middle Initial)
Humana Inc. PACMailing Address 975 F Street NW
Suite 550

City	State	Zip Code
Washington	DC	20004-1458

FEC ID number of contributing
federal political committee.**C** C00271007

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37065

Amount of Each Receipt this Period

1000

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

4000.00

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

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

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Independent Community Bankers of America PACMailing Address 1615 L Street NW
Suite 900

City	State	Zip Code
Washington	DC	20036-5623

FEC ID number of contributing
federal political committee.**C** C00032698

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37233

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Independent Insurance Agents & Brokers of America, Inc. PACMailing Address 20 F Street NW
Suite 610

City	State	Zip Code
Washington	DC	20001-6707

FEC ID number of contributing
federal political committee.**C** C00022343

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37234

Amount of Each Receipt this Period

2000

C. Full Name (Last, First, Middle Initial)
IPAA Wildcatters FundMailing Address 1201 15th Street NW
Suite 300

City	State	Zip Code
Washington	DC	20005-2899

FEC ID number of contributing
federal political committee.**C** C00246306

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37002

Amount of Each Receipt this Period

1000

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

4000.00

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

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

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

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial) John Deere PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2015	
Mailing Address 1 John Deere Place		Transaction ID : A-CF37066	
City Moline	State IL	Zip Code 61265-8010	Amount of Each Receipt this Period 5000
FEC ID number of contributing federal political committee. C C00204099			
Name of Employer Occupation			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10000	
B. Full Name (Last, First, Middle Initial) Koch Industries Inc PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015	
Mailing Address 600 14th Street NW Suite 800		Transaction ID : A-CF37003	
City Washington	State DC	Zip Code 20005-2099	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00236489			
Name of Employer Occupation			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 6500	
C. Full Name (Last, First, Middle Initial) Koch Industries Inc PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2015	
Mailing Address 600 14th Street NW Suite 800		Transaction ID : A-CF37004	
City Washington	State DC	Zip Code 20005-2099	Amount of Each Receipt this Period 1500
FEC ID number of contributing federal political committee. C C00236489			
Name of Employer Occupation			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 6500	
SUBTOTAL of Receipts This Page (optional).....		7500.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Lockheed Martin Corporation Employees PACMailing Address 2121 Crystal Drive
Suite 100

City	State	Zip Code
Arlington	VA	22202-3706

FEC ID number of contributing
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36773

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Lockheed Martin Corporation Employees PACMailing Address 2121 Crystal Drive
Suite 100

City	State	Zip Code
Arlington	VA	22202-3706

FEC ID number of contributing
federal political committee.**C** C00303024

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		30		2015

Transaction ID : A-CF37154

Amount of Each Receipt this Period

5000

\$5,000 refunded 12/31/2015

Full Name (Last, First, Middle Initial)

LPL Financial LLC PACMailing Address 75 State Street
Floor 24

City	State	Zip Code
Boston	MA	02109-1827

FEC ID number of contributing
federal political committee.**C** C00486217

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37235

Amount of Each Receipt this Period

5000

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

11000.00

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

SCHEDULE A (FEC Form 3) **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"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	------------------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Marathon Petroleum Corporation Employees PAC

Mailing Address PO Box 75000

City	State	Zip Code
Detroit	MI	48275-0001

FEC ID number of contributing federal political committee.

C C00496307

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37236

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Massachusetts Mutual Life Insurance Company PAC

Mailing Address 1295 State Street

City	State	Zip Code
Springfield	MA	01111-0001

FEC ID number of contributing federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

7000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37005

Amount of Each Receipt this Period

3000

Redesignation requested

C. Full Name (Last, First, Middle Initial)
MMC Corp. PAC

Mailing Address 10955 Lowell Avenue
Suite 350

City	State	Zip Code
Overland Park	KS	66210-2408

FEC ID number of contributing federal political committee.

C C00509356

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37067

Amount of Each Receipt this Period

1500

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

7000.00

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

SCHEDULE A (FEC Form 3) **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"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Morgan Stanley PAC

A.

Mailing Address 1585 Broadway

Floor 9

City

New York

State

NY

Zip Code

10036-8200

FEC ID number of contributing
federal political committee.

C C00337626

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37130

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Motion Picture Association PAC

B.

Mailing Address 1600 I Street NW

City

Washington

State

DC

Zip Code

20006-4010

FEC ID number of contributing
federal political committee.

C C00139519

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37131

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

National Association Of Convenience Stores PAC

C.

Mailing Address 1600 Duke Street

City

Alexandria

State

VA

Zip Code

22314-3466

FEC ID number of contributing
federal political committee.

C C00126763

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37237

Amount of Each Receipt this Period

2500

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

4500.00

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

SCHEDULE A (FEC Form 3) **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"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

National Association of Insurance and Financial Advisors PAC

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042-1260

FEC ID number of contributing
federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37007

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

National Association of Insurance and Financial Advisors PAC

Mailing Address 2901 Telestar Court

City

Falls Church

State

VA

Zip Code

22042-1260

FEC ID number of contributing
federal political committee.

C C00005249

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37008

Amount of Each Receipt this Period

2000

Full Name (Last, First, Middle Initial)

National Beer Wholesalers Association PAC

Mailing Address 1101 King Street
Suite 600

City

Alexandria

State

VA

Zip Code

22314-2965

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2016

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37132

Amount of Each Receipt this Period

2500

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

7000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
National Biodiesel Board PAC

Mailing Address PO Box 104898

City	State	Zip Code
Jefferson City	MO	65110-4898

FEC ID number of contributing
federal political committee.**C** C00484592

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37068

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Road

City	State	Zip Code
Alexandria	VA	22314-6302

FEC ID number of contributing
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37238

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
National Community Pharmacists Association PAC

Mailing Address 100 Daingerfield Road

City	State	Zip Code
Alexandria	VA	22314-6302

FEC ID number of contributing
federal political committee.**C** C00030809

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37239

Amount of Each Receipt this Period

500

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC

Mailing Address 1125 Executive Circle

City	State	Zip Code
Irving	TX	75038-2522

FEC ID number of contributing
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37009

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
National Emergency Medicine PAC

Mailing Address 1125 Executive Circle

City	State	Zip Code
Irving	TX	75038-2522

FEC ID number of contributing
federal political committee.**C** C00140061

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37240

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
National Federation of Independent Business/Save Americas Free Enterprise TrustMailing Address 1201 F Street NW
Suite 200

City	State	Zip Code
Washington	DC	20004-1221

FEC ID number of contributing
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2015

Transaction ID : A-CF37092

Amount of Each Receipt this Period

2500

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
National Rifle Association Of America Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030-7400

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M / D D / Y Y Y Y
12 22 2015

Transaction ID : A-CF37133

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
National Stone, Sand & Gravel Association ROCKPAC

Mailing Address 1605 King Street

City State Zip Code
Alexandria VA 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
4000

Date of Receipt

M M / D D / Y Y Y Y
11 16 2015

Transaction ID : A-CF36921

Amount of Each Receipt this Period

2500

C. Full Name (Last, First, Middle Initial)
New York Life Insurance Company PAC

Mailing Address 51 Madison Avenue
Room 1109

City State Zip Code
New York NY 10010-1603

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

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
7500

Date of Receipt

M M / D D / Y Y Y Y
11 30 2015

Transaction ID : A-CF37010

Amount of Each Receipt this Period

2500

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

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

6000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
NextEra Energy, Inc PAC

Mailing Address 700 Universe Boulevard

City North Palm Beach State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date 9500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36689

Amount of Each Receipt this Period

1500

B. Full Name (Last, First, Middle Initial)
NextEra Energy, Inc PAC

Mailing Address 700 Universe Boulevard

City North Palm Beach State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date 9500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36690

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
NextEra Energy, Inc PAC

Mailing Address 700 Universe Boulevard

City North Palm Beach State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date 9500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2015

Transaction ID : A-CF36691

Amount of Each Receipt this Period

1000

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

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
NextEra Energy, Inc PAC

Mailing Address 700 Universe Boulevard

City North Palm Beach State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
9500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2015

Transaction ID : A-CF37119

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Occidental Petroleum Corporation PAC

Mailing Address 10889 Wilshire Boulevard

City Los Angeles State CA Zip Code 90024-4201

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2015

Transaction ID : A-CF37145

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
Osteopathic PAC

Mailing Address 1090 Vermont Avenue NW
Suite 500

City Washington State DC Zip Code 20005-4905

FEC ID number of contributing federal political committee. **C** C00113803

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		18		2015

Transaction ID : A-CF36929

Amount of Each Receipt this Period

1000

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

5000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 84 OF 166

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
PAC of The American Association of Orthopaedic SurgeonsMailing Address 317 Massachusetts Avenue NE
Floor 1

City	State	Zip Code
Washington	DC	20002-5769

FEC ID number of contributing
federal political committee.**C** C00343137

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2015

Transaction ID : A-CF36861

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Pacific Life Insurance Company PAC

Mailing Address 700 Newport Center Drive

City	State	Zip Code
Newport Beach	CA	92660-6307

FEC ID number of contributing
federal political committee.**C** C00068528

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37070

Amount of Each Receipt this Period

1500

C. Full Name (Last, First, Middle Initial)
Panhandle Peanut Growers PAC

Mailing Address PO Box 361

City	State	Zip Code
Wellington	TX	79095-0361

FEC ID number of contributing
federal political committee.**C** C00382507

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37072

Amount of Each Receipt this Period

500

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

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Polaris Industries Inc. Political Participation Program

Mailing Address 2100 Highway 55

City	State	Zip Code
Medina	MN	55340-9770

FEC ID number of contributing
federal political committee.**C** C00279497

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37071

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Raytheon Company PACMailing Address 1100 Wilson Boulevard
Suite 1500

City	State	Zip Code
Arlington	VA	22209-3900

FEC ID number of contributing
federal political committee.**C** C00097568

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

8000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		14		2015

Transaction ID : A-CF36562

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Raytheon Company PACMailing Address 1100 Wilson Boulevard
Suite 1500

City	State	Zip Code
Arlington	VA	22209-3900

FEC ID number of contributing
federal political committee.**C** C00097568

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

8000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36756

Amount of Each Receipt this Period

1000

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

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Raytheon Company PAC

Mailing Address 1100 Wilson Boulevard
Suite 1500

City State Zip Code
Arlington VA 22209-3900

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
8000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2015

Transaction ID : A-CF36757

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Renewable Energy Group Inc PAC

Mailing Address 416 S Bell Ave

City State Zip Code
Ames IA 50010

FEC ID number of contributing federal political committee. **C** C00536466

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37225

Amount of Each Receipt this Period

2000

C. Full Name (Last, First, Middle Initial)
Reynolds American Inc. PAC

Mailing Address PO Box 718

City State Zip Code
Winston Salem NC 27102-0718

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37241

Amount of Each Receipt this Period

2500

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

5500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 166

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Salem Communications Corporation PAC

Mailing Address 4880 Santa Rosa Road

City	State	Zip Code
Camarillo	CA	93012-5190

FEC ID number of contributing
federal political committee.**C** C00321158

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		18		2015

Transaction ID : A-CF36930

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Seniors Housing PACMailing Address 5225 Wisconsin Avenue NW
Suite 502

City	State	Zip Code
Washington	DC	20015-2034

FEC ID number of contributing
federal political committee.**C** C00325332

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37134

Amount of Each Receipt this Period

5000

C. Full Name (Last, First, Middle Initial)
Society of Thoracic Surgeons PACMailing Address 20 F Street, NW
Suite 310 C

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.**C** C00325936

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		15		2015

Transaction ID : A-CF37101

Amount of Each Receipt this Period

1000

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

7000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Sony Pictures Entertainment, Inc. PACMailing Address 10202 Washington Boulevard
Thalberg 1111

City	State	Zip Code
Culver City	CA	90232-3119

FEC ID number of contributing
federal political committee. **C** C00282038

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37074

Amount of Each Receipt this Period

1000

B. Full Name (Last, First, Middle Initial)
Spine PAC of The National Association of Spine Specialists

Mailing Address 7075 Veterans Boulevard

City	State	Zip Code
Burr Ridge	IL	60527-5614

FEC ID number of contributing
federal political committee. **C** C00349225

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37006

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Teachers Insurance Annuity Assoc of America College Retirement Equities Fund PACMailing Address 601 13th Street NW
Suite 700 N

City	State	Zip Code
Washington	DC	20005-3807

FEC ID number of contributing
federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)Election Cycle-to-Date
5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37012

Amount of Each Receipt this Period

2500

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

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	------------------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial)

The American Congress of OB-GYNs PAC

Mailing Address 409 12th Street SW

City

Washington

State

DC

Zip Code

20024-2125

FEC ID number of contributing
federal political committee.**C** C00364158

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37069

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

The Iberdrola USA PAC

Mailing Address 52 Farm View Drive

City

New Gloucester

State

ME

Zip Code

04260-5100

FEC ID number of contributing
federal political committee.**C** C00406801

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

2500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37001

Amount of Each Receipt this Period

2500

Full Name (Last, First, Middle Initial)

The Walt Disney Company Employees PACMailing Address 425 3rd Street SW
Suite 1100

City

Washington

State

DC

Zip Code

20024-3227

FEC ID number of contributing
federal political committee.**C** C00197749

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2015

Transaction ID : A-CF37242

Amount of Each Receipt this Period

500

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

4000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Kristi for Congress**A.** Full Name (Last, First, Middle Initial)
Thrivent Financial For Lutherans - Employee PAC

Mailing Address PO Box 1892

City	State	Zip Code
Appleton	WI	54912-1892

FEC ID number of contributing
federal political committee.**C** C00121319

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		30		2015

Transaction ID : A-CF37011

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Thrivent Financial For Lutherans - Employee PAC

Mailing Address PO Box 1892

City	State	Zip Code
Appleton	WI	54912-1892

FEC ID number of contributing
federal political committee.**C** C00121319

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		22		2015

Transaction ID : A-CF37135

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Time Warner Inc. PACMailing Address 800 Connecticut Avenue NW
Suite 1200

City	State	Zip Code
Washington	DC	20006-2736

FEC ID number of contributing
federal political committee.**C** C00339291

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37075

Amount of Each Receipt this Period

1000

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

Full Name (Last, First, Middle Initial)

TrueBlue, Inc PAC

Mailing Address PO Box 2910

City

Tacoma

State

WA

Zip Code

98401-2910

FEC ID number of contributing
federal political committee.

C C00363853

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
12 16 2015

Transaction ID : A-CF37100

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

United Egg Association PAC

Mailing Address 1720 Windward Concourse
Suite 230

City

Alpharetta

State

GA

Zip Code

30005-2289

FEC ID number of contributing
federal political committee.

C C00172841

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y
11 30 2015

Transaction ID : A-CF36996

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

Verizon Wireless Good Government Club

Mailing Address 1300 I Street NW
Suite 400

City

Washington

State

DC

Zip Code

20005-3314

FEC ID number of contributing
federal political committee.

C C00186288

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4500

Date of Receipt

M M / D D / Y Y Y Y
11 10 2015

Transaction ID : A-CF36862

Amount of Each Receipt this Period

1000

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

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Viacom International, Inc. PAC

Mailing Address 1501 M Street NW

Suite 1100

City

Washington

State

DC

Zip Code

20005-1729

FEC ID number of contributing
federal political committee.**C** C00167759

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1500

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37076

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

B. Wal-Mart Stores Inc. PAC For Responsible Government

Mailing Address 702 SW 8th Street

City

Bentonville

State

AR

Zip Code

72716-6209

FEC ID number of contributing
federal political committee.**C** C00093054

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

4000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37078

Amount of Each Receipt this Period

1500

Full Name (Last, First, Middle Initial)

C. Walgreen Co. PAC

Mailing Address 104 Wilmot Road

Stop 1447

City

Deerfield

State

IL

Zip Code

60015-5121

FEC ID number of contributing
federal political committee.**C** C00160770

Name of Employer

Occupation

Receipt For: 2016



Primary



General



Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		09		2015

Transaction ID : A-CF37077

Amount of Each Receipt this Period

1000

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

4000.00

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

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

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wells Fargo Employee PAC

Mailing Address **Sixth Marquette Mac N9305**
084

City **Minneapolis** State **MN** Zip Code **55479-0001**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
4500

Date of Receipt

M M / D D / Y Y Y Y
12 22 2015

Transaction ID : **A-CF37136**

Amount of Each Receipt this Period

2500

B. Full Name (Last, First, Middle Initial)
Western Iowa Energy LLC PAC

Mailing Address **1220 S CENTER STREET**
PO BOX 399

City **WALL LAKE** State **IA** Zip Code **51466**

FEC ID number of contributing federal political committee. **C C00443895**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000

Date of Receipt

M M / D D / Y Y Y Y
12 31 2015

Transaction ID : **A-CF37243**

Amount of Each Receipt this Period

1000

C. Full Name (Last, First, Middle Initial)
Westmoreland For Congress

Mailing Address **PO Box 458**

City **Sharpsburg** State **GA** Zip Code **30277-0458**

FEC ID number of contributing federal political committee. **C C00387126**

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2000

Date of Receipt

M M / D D / Y Y Y Y
11 04 2015

Transaction ID : **A-CF36783**

Amount of Each Receipt this Period

2000

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

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

5500.00

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

Use separate schedule(s)
for each category of the
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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Kristi for Congress

A. Full Name (Last, First, Middle Initial)
Wine and Spirits Wholesalers of America, Inc. PAC

Mailing Address 805 15th Street NW
Suite 430

City State Zip Code
Washington DC 20005-2273

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
9736

Date of Receipt

M M / D D / Y Y Y Y
12 22 2015

Transaction ID : A-CF37137

Amount of Each Receipt this Period

5000

B. Full Name (Last, First, Middle Initial)
Xcel Energy Employee PAC

Mailing Address 1800 Larimer Street
Suite 1200

City State Zip Code
Denver CO 80202-1402

FEC ID number of contributing federal political committee. **C** C00107771

Name of Employer Occupation

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
3500

Date of Receipt

M M / D D / Y Y Y Y
12 22 2015

Transaction ID : A-CF37138

Amount of Each Receipt this Period

2000

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

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

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

7000.00

199159.46

SCHEDULE A (FEC Form 3) **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"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Kristi for Congress

Full Name (Last, First, Middle Initial)

Meta Bank

A.

Mailing Address 2500 S Minnesota Avenue

City

Sioux Falls

State

SD

Zip Code

57105-4729

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1718.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 30 2015

Transaction ID : A-MF36602

Amount of Each Receipt this Period

152.2

Interest Income

Full Name (Last, First, Middle Initial)

Meta Bank

B.

Mailing Address 2500 S Minnesota Avenue

City

Sioux Falls

State

SD

Zip Code

57105-4729

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1718.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 30 2015

Transaction ID : A-MF36985

Amount of Each Receipt this Period

160.81

Interest Income

Full Name (Last, First, Middle Initial)

Meta Bank

C.

Mailing Address 2500 S Minnesota Avenue

City

Sioux Falls

State

SD

Zip Code

57105-4729

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1718.52

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : A-MF37197

Amount of Each Receipt this Period

172.97

Interest Income

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

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

485.98

485.98

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City	State	Zip Code
Newark	NJ	07101-1270

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

550

Transaction ID : B-E-36391

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Sona

Mailing Address 660 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-4346

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

550

Transaction ID : B-S-995**[MEMO ITEM]**

Subitemization of American Express(10/05/15)

c. American Express

Mailing Address PO Box 1270

City	State	Zip Code
Newark	NJ	07101-1270

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

4905.47

Transaction ID : B-E-36594

Original vendors exceeding reporting threshold itemized as memo transactions.

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

5455.47

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Ace Beverage

Mailing Address 3301 New Mexico Avenue NW

City	State	Zip Code
Washington	DC	20016-3622

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

542.8

Transaction ID : B-S-1022

[MEMO ITEM]

Subitemization of American Express(11/06/15)

B. Del Frisco's Grille

Mailing Address 1201 Pennsylvania Avenue NW

City	State	Zip Code
Washington	DC	20004-2401

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

2120

Transaction ID : B-S-1021

[MEMO ITEM]

Subitemization of American Express(11/06/15)

c. Occasions Caterers

Mailing Address 655 Taylor Street NE

City	State	Zip Code
Washington	DC	20017-2063

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

868.1

Transaction ID : B-S-1025

[MEMO ITEM]

Subitemization of American Express(11/06/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Menus Catering

Mailing Address 655 Taylor Street NE

City	State	Zip Code
Washington	DC	20017-2063

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2015

Amount of Each Disbursement this Period

1204.16

Transaction ID : B-S-1024

[MEMO ITEM]

Subitemization of American Express(11/06/15)

B. American Express

Mailing Address PO Box 1270

City	State	Zip Code
Newark	NJ	07101-1270

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

14571.57

Transaction ID : B-E-36952

Original vendors exceeding reporting threshold itemized as memo transactions.

C. Bearnaise Restaurant

Mailing Address 315 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1148

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

1916.14

Transaction ID : B-S-1026

[MEMO ITEM]

Subitemization of American Express(11/23/15)

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

14571.57

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

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Bearnaise Restaurant

Mailing Address 315 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1148

Purpose of Disbursement
Catering

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

1506.4

Transaction ID : B-S-1047

[MEMO ITEM]

Subitemization of American Express(11/23/15)

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

50

Transaction ID : B-S-1048

[MEMO ITEM]

Subitemization of American Express(11/23/15)

c. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Catering/Facility Rental

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

3105.21

Transaction ID : B-S-1050

[MEMO ITEM]

Subitemization of American Express(11/23/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

8.99

Transaction ID : B-S-1036

[MEMO ITEM]

Subitemization of American Express(11/23/15)

Full Name (Last, First, Middle Initial)

B. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

50

Transaction ID : B-S-1037

[MEMO ITEM]

Subitemization of American Express(11/23/15)

Full Name (Last, First, Middle Initial)

c. Menus Catering

Mailing Address 655 Taylor Street NE

City	State	Zip Code
Washington	DC	20017-2063

Purpose of Disbursement
Catering

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

555.9

Transaction ID : B-S-1028

[MEMO ITEM]

Subitemization of American Express(11/23/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Cabelas

Mailing Address 1 Cabela Drive

City	State	Zip Code
Sidney	NE	69160-1001

Purpose of Disbursement
Fundraiser Printing/Embroidery

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

2864.15

Transaction ID : B-S-1033

[MEMO ITEM]

Subitemization of American Express(11/23/15)

B. Acqua AI 2

Mailing Address 212 7th Street SE

City	State	Zip Code
Washington	DC	20003-4311

Purpose of Disbursement
Catering

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

2288.2

Transaction ID : B-S-1034

[MEMO ITEM]

Subitemization of American Express(11/23/15)

c. Avalon Hotel

Mailing Address 9400 W Olympic Boulevard

City	State	Zip Code
Beverly Hills	CA	90212-4552

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

361.89

Transaction ID : B-S-1042

[MEMO ITEM]

Subitemization of American Express(11/23/15)

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

0.00

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

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Avis Rent-A-Car

Mailing Address 6 Sylvan Way

City	State	Zip Code
Parsippany	NJ	07054-3826

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

324.13

Transaction ID : B-S-1035

[MEMO ITEM]

Subitemization of American Express(11/23/15)

B. Sona

Mailing Address 660 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-4346

Purpose of Disbursement
Catering/Facility Rental

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

730

Transaction ID : B-S-1029

[MEMO ITEM]

Subitemization of American Express(11/23/15)

c. Sona

Mailing Address 660 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-4346

Purpose of Disbursement
Catering/Facility Rental

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		23		2015

Amount of Each Disbursement this Period

550

Transaction ID : B-S-1030

[MEMO ITEM]

Subitemization of American Express(11/23/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Aristotle International

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Compliance Software

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		03		2015

Amount of Each Disbursement this Period

650

Transaction ID : B-E-36511

B. Aristotle International

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Compliance Software

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2015

Amount of Each Disbursement this Period

650

Transaction ID : B-E-36800

C. Aristotle International

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003-1164

Purpose of Disbursement
Compliance Software

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

650

Transaction ID : B-E-37036

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

1950.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Broghamer Consulting LLC

Mailing Address 502 Monroe Street

City	State	Zip Code
Newport	KY	41071-2006

Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

3	0	1	2	.	8	1
---	---	---	---	---	---	---

Transaction ID : B-E-36431

B. Broghamer Consulting LLC

Mailing Address 502 Monroe Street

City	State	Zip Code
Newport	KY	41071-2006

Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

3	0	1	4	.	0	4
---	---	---	---	---	---	---

Transaction ID : B-E-36595

c. Broghamer Consulting LLC

Mailing Address 502 Monroe Street

City	State	Zip Code
Newport	KY	41071-2006

Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	1	5

Amount of Each Disbursement this Period

3	0	1	4	.	5
---	---	---	---	---	---

Transaction ID : B-E-36988

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

9041.35

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Card Center

Mailing Address PO Box 740846

City	State	Zip Code
Cincinnati	OH	45274-0846

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

5199.69

Transaction ID : B-E-36433

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Food/BeverageCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

9.15

Transaction ID : B-S-1000**[MEMO ITEM]**

Subitemization of Card Center(10/05/15)

C. Fedex

Mailing Address 942 S Shady Grove Road

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement
DeliveryCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

46.39

Transaction ID : B-S-1004**[MEMO ITEM]**

Subitemization of Card Center(10/05/15)

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

5199.69

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 320 S 2nd Avenue

City	State	Zip Code
Sioux Falls	SD	57104-7500

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

223.25

Transaction ID : B-S-1014

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

B. Hy-Vee, Inc.

Mailing Address 5820 Westown Parkway

City	State	Zip Code
West Des Moines	IA	50266-8223

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

657.51

Transaction ID : B-S-1006

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

c. Staples

Mailing Address 500 Staples Drive

City	State	Zip Code
Framingham	MA	01702-4478

Purpose of Disbursement
Office Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

58.7

Transaction ID : B-S-1012

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

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

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Lewis Drug

Mailing Address 500 W 41st Street

City	State	Zip Code
Sioux Falls	SD	57105-6402

Purpose of Disbursement
Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

392

Transaction ID : B-S-1009

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

B. The UPS Store

Mailing Address 55 Glenlake Parkway NE

City	State	Zip Code
Atlanta	GA	30328-3474

Purpose of Disbursement
Delivery

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

15.47

Transaction ID : B-S-1013

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

C. Harolds Photo Centers

Mailing Address 912 W 41st Street

City	State	Zip Code
Sioux Falls	SD	57105-6321

Purpose of Disbursement
Printing

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

7.41

Transaction ID : B-S-1005

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

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

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30354-1989

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

2604.1

Transaction ID : B-S-1002

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

B. AT&T Mobility

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Phone Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		05		2015

Amount of Each Disbursement this Period

826.31

Transaction ID : B-S-998

[MEMO ITEM]

Subitemization of Card Center(10/05/15)

c. Card Center

Mailing Address PO Box 740846

City	State	Zip Code
Cincinnati	OH	45274-0846

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

2154.82

Transaction ID : B-E-36593

Original vendors exceeding reporting threshold itemized as memo transactions.

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

2154.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

16.91

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1067

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(11/09/15)

State:

District:

Full Name (Last, First, Middle Initial)

B. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

52.72

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1069

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(11/09/15)

State:

District:

Full Name (Last, First, Middle Initial)

C. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

40.34

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1070

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(11/09/15)

State:

District:

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 S Shady Grove Road

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement
Delivery

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

14.46

Transaction ID : B-S-1071

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

B. Fedex

Mailing Address 942 S Shady Grove Road

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement
Delivery

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

61.81

Transaction ID : B-S-1076

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

C. Fedex

Mailing Address 942 S Shady Grove Road

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement
Delivery

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

64.74

Transaction ID : B-S-1077

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 S Shady Grove Road

City	State	Zip Code
Memphis	TN	38120-4117

Purpose of Disbursement
Delivery

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

20.5

Transaction ID : B-S-1078

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

B. House of Representatives Gift Shop

Mailing Address B-218 Longworth House Office

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Silent Auction Items

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

57

Transaction ID : B-S-1058

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

c. House of Representatives Gift Shop

Mailing Address B-218 Longworth House Office

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Silent Auction Items

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

57

Transaction ID : B-S-1061

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. House of Representatives Gift Shop

Mailing Address B-218 Longworth House Office

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Silent Auction Items

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

72

Transaction ID : B-S-1062

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

B. AT&T Mobility

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

178.2

Transaction ID : B-S-1059

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

C. AT&T Mobility

Mailing Address PO Box 6463

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

85

Transaction ID : B-S-1060

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Phone Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

383.87

Transaction ID : B-S-1068

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

B. The UPS Store

Mailing Address 55 Glenlake Parkway NE

City	State	Zip Code
Atlanta	GA	30328-3474

Purpose of Disbursement
Delivery

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

88.99

Transaction ID : B-S-1064

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

c. Staples

Mailing Address 500 Staples Drive

City	State	Zip Code
Framingham	MA	01702-4478

Purpose of Disbursement
Office Supplies

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

Amount of Each Disbursement this Period

29.95

Transaction ID : B-S-1065

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 500 Staples Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Framingham	MA	01702-4478

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

42.33

Transaction ID : B-S-1066

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

Full Name (Last, First, Middle Initial)

B. Hy-Vee, Inc.

Mailing Address 5820 Westown Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
West Des Moines	IA	50266-8223

Purpose of Disbursement
Postage/Travel

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

260.28

Transaction ID : B-S-1072

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

Full Name (Last, First, Middle Initial)

c. US Postal Service

Mailing Address 320 S 2nd Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		09		2015

City	State	Zip Code
Sioux Falls	SD	57104-7500

Purpose of Disbursement
Postage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

20.61

Transaction ID : B-S-1081

[MEMO ITEM]

Subitemization of Card Center(11/09/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Card Center

Mailing Address PO Box 740846

City	State	Zip Code
Cincinnati	OH	45274-0846

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 08 / 2015

Amount of Each Disbursement this Period

7932.16

Transaction ID : B-E-36986

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Avalon Hotel

Mailing Address 9400 W Olympic Boulevard

City	State	Zip Code
Beverly Hills	CA	90212-4552

Purpose of Disbursement
Travel

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 08 / 2015

Amount of Each Disbursement this Period

700.68

Transaction ID : B-S-1122**[MEMO ITEM]**

Subitemization of Card Center(12/08/15)

c. Charly's

Mailing Address 606 E King Street

City	State	Zip Code
Chamberlain	SD	57325-1069

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate	
	President	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
12 / 08 / 2015

Amount of Each Disbursement this Period

849.55

Transaction ID : B-S-1145**[MEMO ITEM]**

Subitemization of Card Center(12/08/15)

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

7932.16

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Flowers With LoveMailing Address 2231 Crystal Drive
Lobby 152

City Arlington State VA Zip Code 22202-3781

Purpose of Disbursement
Flower Services

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

125.95

Transaction ID : B-S-1144

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Fedex

Mailing Address 942 S Shady Grove Road

City Memphis State TN Zip Code 38120-4117

Purpose of Disbursement
Delivery

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

32.42

Transaction ID : B-S-1125

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

C. Clubhouse Inn & Suites

Mailing Address 2320 S Louise Avenue

City Sioux Falls State SD Zip Code 57106-4337

Purpose of Disbursement
Travel

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

165.16

Transaction ID : B-S-1095

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

32.42

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1133

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

Full Name (Last, First, Middle Initial)

B. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

11.62

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1135

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

Full Name (Last, First, Middle Initial)

C. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

11.62

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1127

Candidate Name

Category/
Type

Office Sought:

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

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fedex

Mailing Address 942 S Shady Grove Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Memphis	TN	38120-4117

Amount of Each Disbursement this Period

32.42

Purpose of Disbursement
Delivery

001

Transaction ID : B-S-1129

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

Full Name (Last, First, Middle Initial)

B. Hy-Vee, Inc.

Mailing Address 5820 Westown Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
West Des Moines	IA	50266-8223

Amount of Each Disbursement this Period

6.81

Purpose of Disbursement
Travel

001

Transaction ID : B-S-1136

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

Full Name (Last, First, Middle Initial)

c. Hy-Vee, Inc.

Mailing Address 5820 Westown Parkway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
West Des Moines	IA	50266-8223

Amount of Each Disbursement this Period

147

Purpose of Disbursement
Travel

001

Transaction ID : B-S-1137

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

State: District:

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 500 Staples Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Framingham	MA	01702-4478

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

25.67

Transaction ID : B-S-1132

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Cava Mezze

Mailing Address 527 8th Street SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Washington	DC	20003-2835

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

3.25

Transaction ID : B-S-1162

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. Walgreens

Mailing Address 1806 S Minnesota Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

City	State	Zip Code
Sioux Falls	SD	57105-2811

Purpose of Disbursement
Office Supplies

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

17.25

Transaction ID : B-S-1107

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

15

Transaction ID : B-S-1103

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

15

Transaction ID : B-S-1088

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

33

Transaction ID : B-S-1098

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

47

Transaction ID : B-S-1099

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

33

Transaction ID : B-S-1100

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

59

Transaction ID : B-S-1097

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

565.1

Transaction ID : B-S-1139

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

565.1

Transaction ID : B-S-1096

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

565.1

Transaction ID : B-S-1087

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

57

Transaction ID : B-S-1101

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. United Air Lines, Inc

Mailing Address PO Box 66100

City	State	Zip Code
Chicago	IL	60666-0100

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

47

Transaction ID : B-S-1102

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. The UPS Store

Mailing Address 55 Glenlake Parkway NE

City	State	Zip Code
Atlanta	GA	30328-3474

Purpose of Disbursement
Delivery

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

50.9

Transaction ID : B-S-1120

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Harolds Photo Centers

Mailing Address 912 W 41st Street

City	State	Zip Code
Sioux Falls	SD	57105-6321

Purpose of Disbursement
Printing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

14.32

Transaction ID : B-S-1126

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. US Postal Service

Mailing Address 320 S 2nd Avenue

City	State	Zip Code
Sioux Falls	SD	57104-7500

Purpose of Disbursement
Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

196

Transaction ID : B-S-1154

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30354-1989

Purpose of Disbursement
Travel

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

332.6

Transaction ID : B-S-1140

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30354-1989

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

412.6

Transaction ID : B-S-1089

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Delta Air Lines, Inc.

Mailing Address 1030 Delta Boulevard

City	State	Zip Code
Atlanta	GA	30354-1989

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

412.6

Transaction ID : B-S-1090

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

28.38

Transaction ID : B-S-1108

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

28.44

Transaction ID : B-S-1146

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

5.5

Transaction ID : B-S-1147

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

10

Transaction ID : B-S-1160

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Cedar Shore Resort

Mailing Address PO Box 308

City	State	Zip Code
Chamberlain	SD	57325-0308

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

11.5

Transaction ID : B-S-1161

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Giftport NewsMailing Address 2801 N Jaycee Lane
Suite 6

City	State	Zip Code
Sioux Falls	SD	57104-0196

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

200.04

Transaction ID : B-S-1131

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

C. AT&T Mobility

Mailing Address PO Box 6463

City	State	Zip Code
Carol Stream	IL	60197-6463

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

410.32

Transaction ID : B-S-1130

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

--

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

PAGE 129 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Food/Beverage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

23.34

Transaction ID : B-S-1153

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Marchand Travel, LLC

Mailing Address 515 1st Avenue SE

City	State	Zip Code
Watertown	SD	57201-3708

Purpose of Disbursement
Travel

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

35

Transaction ID : B-S-1091

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

c. Marchand Travel, LLC

Mailing Address 515 1st Avenue SE

City	State	Zip Code
Watertown	SD	57201-3708

Purpose of Disbursement
Travel

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

Amount of Each Disbursement this Period

35

Transaction ID : B-S-1092

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

PAGE 130 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Marchand Travel, LLC

Mailing Address 515 1st Avenue SE

City	State	Zip Code
Watertown	SD	57201-3708

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

35

Transaction ID : B-S-1093

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Marchand Travel, LLC

Mailing Address 515 1st Avenue SE

City	State	Zip Code
Watertown	SD	57201-3708

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

35

Transaction ID : B-S-1094

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

C. Hertz

Mailing Address 225 Brae Boulevard

City	State	Zip Code
Park Ridge	NJ	07656-1870

Purpose of Disbursement
Travel

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

262.08

Transaction ID : B-S-1151

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

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

0.00

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

PAGE 131 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Expedia, Inc

Mailing Address 333 108th Avenue NE

City	State	Zip Code
Bellevue	WA	98004-5703

Purpose of Disbursement
Travel

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		08		2015

Amount of Each Disbursement this Period

65

Transaction ID : B-S-1141

[MEMO ITEM]

Subitemization of Card Center(12/08/15)

B. Fellowship of Christian AthletesMailing Address 1601 E 69th Street
Suite 301

City	State	Zip Code
Sioux Falls	SD	57108-8322

Purpose of Disbursement
Rent

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

Amount of Each Disbursement this Period

487.33

Transaction ID : B-E-36047

C. Fellowship of Christian AthletesMailing Address 1601 E 69th Street
Suite 301

City	State	Zip Code
Sioux Falls	SD	57108-8322

Purpose of Disbursement
Rent

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

Amount of Each Disbursement this Period

487.33

Transaction ID : B-E-36469

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

974.66

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

PAGE 132 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Fellowship of Christian AthletesMailing Address 1601 E 69th Street
Suite 301City State Zip Code
Sioux Falls SD 57108-8322Purpose of Disbursement
Rent

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

487.33

Transaction ID : B-E-36572

B. Fellowship of Christian AthletesMailing Address 1601 E 69th Street
Suite 301City State Zip Code
Sioux Falls SD 57108-8322Purpose of Disbursement
Rent

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

487.33

Transaction ID : B-E-37047

C. Kari Mertz Photography

Mailing Address PO Box 33

City State Zip Code
Arlington SD 57212-0033Purpose of Disbursement
Printing

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

Amount of Each Disbursement this Period

3052.8

Transaction ID : B-E-36935

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

4027.46

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

PAGE 133 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kari Mertz Photography

Mailing Address PO Box 33

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

City	State	Zip Code
Arlington	SD	57212-0033

Purpose of Disbursement
Printing/Postage

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

3052.8

Transaction ID : B-E-37038

B. Meta Bank

Mailing Address 2500 S Minnesota Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2015

City	State	Zip Code
Sioux Falls	SD	57105-4729

Purpose of Disbursement
Bank Fee

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

385

Transaction ID : B-E-36601

c. Meta Bank

Mailing Address 2500 S Minnesota Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		30		2015

City	State	Zip Code
Sioux Falls	SD	57105-4729

Purpose of Disbursement
Bank Fee

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

385

Transaction ID : B-E-36984

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

3822.80

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

PAGE 134 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Meta Bank

Mailing Address 2500 S Minnesota Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		31		2015

City	State	Zip Code
Sioux Falls	SD	57105-4729

Amount of Each Disbursement this Period

385

Purpose of Disbursement
Bank Fee

001

Transaction ID : B-E-37198

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Midcontinent Communications

Mailing Address PO Box 5010

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

City	State	Zip Code
Sioux Falls	SD	57117-5010

Amount of Each Disbursement this Period

24.66

Purpose of Disbursement
Phone Service

001

Transaction ID : B-E-36392

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Midcontinent Communications

Mailing Address PO Box 5010

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

City	State	Zip Code
Sioux Falls	SD	57117-5010

Amount of Each Disbursement this Period

154

Purpose of Disbursement
Internet Service

001

Transaction ID : B-E-36552

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

563.66

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

PAGE 135 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Midcontinent Communications

Mailing Address PO Box 5010

City	State	Zip Code
Sioux Falls	SD	57117-5010

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

24.65

Transaction ID : B-E-36596

B. Midcontinent Communications

Mailing Address PO Box 5010

City	State	Zip Code
Sioux Falls	SD	57117-5010

Purpose of Disbursement
Phone/Internet Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

159

Transaction ID : B-E-36892

C. Midcontinent Communications

Mailing Address PO Box 5010

City	State	Zip Code
Sioux Falls	SD	57117-5010

Purpose of Disbursement
Phone Service

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

24.65

Transaction ID : B-E-36936

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

208.30

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

PAGE 136 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Midcontinent Communications

Mailing Address PO Box 5010

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

City	State	Zip Code
Sioux Falls	SD	57117-5010

Purpose of Disbursement
Internet Service

001

Amount of Each Disbursement this Period

159

Transaction ID : B-E-37046

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)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Mini Stor All

Mailing Address 501 E 41st Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2015

City	State	Zip Code
Sioux Falls	SD	57105-5931

Purpose of Disbursement
Storage

001

Amount of Each Disbursement this Period

62

Transaction ID : B-E-36600

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)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Mini Stor All

Mailing Address 501 E 41st Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		28		2015

City	State	Zip Code
Sioux Falls	SD	57105-5931

Purpose of Disbursement
Storage

001

Amount of Each Disbursement this Period

62

Transaction ID : B-E-36980

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)	

State:

District:

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

283.00

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

PAGE 137 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Mini Stor All

Mailing Address 501 E 41st Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		30		2015

City	State	Zip Code
Sioux Falls	SD	57105-5931

Purpose of Disbursement
Storage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

62

Transaction ID : B-E-37199**B. Monarch Sales**

Mailing Address 731 N Cliff Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

City	State	Zip Code
Sioux Falls	SD	57103-0126

Purpose of Disbursement
Printing

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

2359.15

Transaction ID : B-E-36334**c. Paycor**Mailing Address 644 Linn Street
Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

City	State	Zip Code
Cincinnati	OH	45203-1734

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

774.34

Transaction ID : B-E-36513**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3195.49

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

PAGE 139 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

778.05

Transaction ID : B-E-36802

B. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2015

Amount of Each Disbursement this Period

71.13

Transaction ID : B-E-36801

C. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

Amount of Each Disbursement this Period

773.59

Transaction ID : B-E-36942

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

1622.77

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

PAGE 140 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
11	18	2015

Amount of Each Disbursement this Period

64.13

Transaction ID : B-E-36948

B. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	02	2015

Amount of Each Disbursement this Period

772.8

Transaction ID : B-E-37037

c. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
12	03	2015

Amount of Each Disbursement this Period

64.13

Transaction ID : B-E-37035

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

901.06

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Taxes

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

7	7	5	.	2	6
---	---	---	---	---	---

Transaction ID : B-E-37104

B. PaycorMailing Address 644 Linn Street
Suite 200

City Cincinnati State OH Zip Code 45203-1734

Purpose of Disbursement
Payroll Service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	8		2	0	1	5

Amount of Each Disbursement this Period

6	4	.	1	3
---	---	---	---	---

Transaction ID : B-E-37103

C. Qualified Presort Service, LLC

Mailing Address PO Box 85010

City Sioux Falls State SD Zip Code 57118-5010

Purpose of Disbursement
Personnel Service

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1	0	9	.	2
---	---	---	---	---

Transaction ID : B-E-36271

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

948.59

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Qualified Presort Service, LLC

Mailing Address PO Box 85010

City	State	Zip Code
Sioux Falls	SD	57118-5010

Purpose of Disbursement
Personnel Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

Amount of Each Disbursement this Period

109.2

Transaction ID : B-E-36553

B. Qualified Presort Service, LLC

Mailing Address PO Box 85010

City	State	Zip Code
Sioux Falls	SD	57118-5010

Purpose of Disbursement
Personnel Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

114.4

Transaction ID : B-E-36893

C. Qualified Presort Service, LLC

Mailing Address PO Box 85010

City	State	Zip Code
Sioux Falls	SD	57118-5010

Purpose of Disbursement
Personnel Service

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

98.8

Transaction ID : B-E-37028

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

322.40

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Red River Co., LLC

Mailing Address 8501 Bayside Rd., Suite C4-D

City	State	Zip Code
Chesapeake Beach	MD	20732

Purpose of Disbursement
Finance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

2500

Transaction ID : B-E-36606

B. Red River Co., LLC

Mailing Address 8501 Bayside Rd., Suite C4-D

City	State	Zip Code
Chesapeake Beach	MD	20732

Purpose of Disbursement
Finance Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

4859.76

Transaction ID : B-E-36901

c. Red River Co., LLC

Mailing Address 8501 Bayside Rd., Suite C4-D

City	State	Zip Code
Chesapeake Beach	MD	20732

Purpose of Disbursement
Finance Consulting/Facility Rental

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

2800

Transaction ID : B-E-37090

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

10159.76

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Sisson Printing, Inc.

Mailing Address 3500 S Duluth Avenue

City	State	Zip Code
Sioux Falls	SD	57105-6416

Purpose of Disbursement
Printing

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

Amount of Each Disbursement this Period

882.56

Transaction ID : B-E-36263

B. Sisson Printing, Inc.

Mailing Address 3500 S Duluth Avenue

City	State	Zip Code
Sioux Falls	SD	57105-6416

Purpose of Disbursement
Printing

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

Amount of Each Disbursement this Period

441.28

Transaction ID : B-E-37029

c. State Farm

Mailing Address PO Box 680001

City	State	Zip Code
Dallas	TX	75368-0001

Purpose of Disbursement
Insurance

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		06		2015

Amount of Each Disbursement this Period

44.16

Transaction ID : B-E-36547

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

1368.00

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. State Farm

Mailing Address PO Box 680001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

City	State	Zip Code
Dallas	TX	75368-0001

Purpose of Disbursement
Insurance

001

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)	

State:

District:

Amount of Each Disbursement this Period

63

Transaction ID : B-E-36571

B. State Farm

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 680001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2015

City	State	Zip Code
Dallas	TX	75368-0001

Purpose of Disbursement
Insurance

001

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)	

State:

District:

Amount of Each Disbursement this Period

46.3

Transaction ID : B-E-36799

C. State Farm

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 680001

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

City	State	Zip Code
Dallas	TX	75368-0001

Purpose of Disbursement
Insurance

001

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)	

State:

District:

Amount of Each Disbursement this Period

63

Transaction ID : B-E-36597

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

172.30

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

PAGE 146 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. State Farm

Mailing Address PO Box 680001

City	State	Zip Code
Dallas	TX	75368-0001

Purpose of Disbursement
Insurance

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		04		2015

Amount of Each Disbursement this Period

44.58

Transaction ID : B-E-37034

B. The Lukens Company

Mailing Address 2800 S Shirlington Road

City	State	Zip Code
Arlington	VA	22206-3601

Purpose of Disbursement
Printing/Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

Amount of Each Disbursement this Period

6494.39

Transaction ID : B-E-36045

c. The Lukens Company

Mailing Address 2800 S Shirlington Road

City	State	Zip Code
Arlington	VA	22206-3601

Purpose of Disbursement
Printing/Postage

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

9612.92

Transaction ID : B-E-36605

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

16151.89

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

PAGE 147 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. The Mail Haus

Mailing Address 1745 Suburban Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2015

City	State	Zip Code
De Pere	WI	54115-1850

Amount of Each Disbursement this Period

3716.45

Purpose of Disbursement
Postage

001

Transaction ID : B-E-36548

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. The Printers, Inc.

Mailing Address 510 S 1st Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		15		2015

City	State	Zip Code
Sioux Falls	SD	57104-6902

Amount of Each Disbursement this Period

165.41

Purpose of Disbursement
Printing

001

Transaction ID : B-E-37039

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Transfirst

Mailing Address 1393 Veterans Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2015

City	State	Zip Code
Hauppauge	NY	11788-3042

Amount of Each Disbursement this Period

81.04

Purpose of Disbursement
Credit Card Merchant Fee

001

Transaction ID : B-E-36958

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

3962.90

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Transfirst

Mailing Address 1393 Veterans Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

City	State	Zip Code
Hauppauge	NY	11788-3042

Amount of Each Disbursement this Period

32.4

Purpose of Disbursement
Credit Card Merchant Fee

001

Transaction ID : B-E-36894

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. Transfirst

Mailing Address 1393 Veterans Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		10		2015

City	State	Zip Code
Hauppauge	NY	11788-3042

Amount of Each Disbursement this Period

940.22

Purpose of Disbursement
Credit Card Merchant Fee

001

Transaction ID : B-E-37089

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

c. Triumph Campaigns

Mailing Address PO Box 12243

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

City	State	Zip Code
Jackson	MS	39236-2243

Amount of Each Disbursement this Period

7000

Purpose of Disbursement
Political Strategy Consulting

001

Transaction ID : B-E-36550

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

7972.62

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

PAGE 149 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Washington Tax & Public Policy GroupMailing Address 300 New Jersey Avenue NW
Suite 301

City Washington State DC Zip Code 20001-2030

Purpose of Disbursement
Facility Rental

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		08		2015

Amount of Each Disbursement this Period

250

Transaction ID : B-E-36554

B. Watertown Area Chamber of Commerce

Mailing Address PO Box 1113

City Watertown State SD Zip Code 57201-6113

Purpose of Disbursement
Event Tickets

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

Amount of Each Disbursement this Period

198.15

Transaction ID : B-E-36393

C. Watertown Area Chamber of Commerce

Mailing Address PO Box 1113

City Watertown State SD Zip Code 57201-6113

Purpose of Disbursement
Event Tickets

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

30

Transaction ID : B-E-36604

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

478.15

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

PAGE 150 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Ashley Flynn

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Amount of Each Disbursement this Period

2007.97

Purpose of Disbursement
Payroll

001

Transaction ID : B-E-36514

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)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Ashley Flynn

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Amount of Each Disbursement this Period

2007.97

Purpose of Disbursement
Payroll

001

Transaction ID : B-E-36566

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)	

State:

District:

Full Name (Last, First, Middle Initial)

C. Ashley Flynn

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Amount of Each Disbursement this Period

44.49

Purpose of Disbursement
Candy Reimbursement

001

Transaction ID : B-E-36545

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)	

State:

District:

Original vendors exceeding reporting threshold itemized as memo transactions.

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

4060.43

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Costco

Mailing Address 3700 S Grange Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

City	State	Zip Code
Sioux Falls	SD	57105-6359

Amount of Each Disbursement this Period

44.49

Purpose of Disbursement
Candy

001

Transaction ID : B-S-1015

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)
[MEMO ITEM]

Subitemization of Ashley Flynn(10/20/15)

State: District:

Full Name (Last, First, Middle Initial)

B. Ashley Flynn

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Amount of Each Disbursement this Period

2007.97

Purpose of Disbursement
Payroll

001

Transaction ID : B-E-36803

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. Ashley Flynn

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Amount of Each Disbursement this Period

2007.97

Purpose of Disbursement
Payroll

001

Transaction ID : B-E-36943

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

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

4015.94

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Ashley Flynn

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

Amount of Each Disbursement this Period

2007.97

Transaction ID : B-E-37040

B. Ashley Flynn

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2015

Amount of Each Disbursement this Period

2007.97

Transaction ID : B-E-37105

c. Mary HartMailing Address 9440 Santa Monica Boulevard
Suite 407

City	State	Zip Code
Beverly Hills	CA	90210-4607

Purpose of Disbursement
Inkind: Food/Beverage/Parking ServiceCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

Amount of Each Disbursement this Period

1442.3

Transaction ID : B-I-36940

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

5458.24

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-36515

B. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-36567

c. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Mileage Reimbursement

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

Amount of Each Disbursement this Period

121.22

Transaction ID : B-E-36470

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

506.02

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Candy Reimbursement

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2015

Amount of Each Disbursement this Period

25.76

Transaction ID : B-E-36471

Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial)

B. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-36804

Full Name (Last, First, Middle Initial)

c. Mary Beth Hollatz

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-36944

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

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

410.56

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

PAGE 155 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Mary Beth Hollatz

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Mileage Reimbursement

001

Amount of Each Disbursement this Period

277

Transaction ID : B-E-36896

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)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Mary Beth Hollatz

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-37041

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)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Mary Beth Hollatz

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Amount of Each Disbursement this Period

192.4

Transaction ID : B-E-37106

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)	

State:

District:

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

661.80

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

PAGE 156 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

78.5

Transaction ID : B-E-36516

B. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Mileage Reimbursement

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		02		2015

Amount of Each Disbursement this Period

17.5

Transaction ID : B-E-36432

c. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

Amount of Each Disbursement this Period

112.52

Transaction ID : B-E-36568

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

208.52

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

PAGE 157 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

46.17

Transaction ID : B-E-36805

B. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Mileage Reimbursement

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

16

Transaction ID : B-E-36603

c. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2015

Amount of Each Disbursement this Period

87.73

Transaction ID : B-E-36945

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

149.90

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

PAGE 158 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		02		2015

Amount of Each Disbursement this Period

78.5

Transaction ID : B-E-37042

Full Name (Last, First, Middle Initial)

B. Kylee A. Kettering

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		17		2015

Amount of Each Disbursement this Period

60.03

Transaction ID : B-E-37107

Full Name (Last, First, Middle Initial)

c. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

Amount of Each Disbursement this Period

78.5

Transaction ID : B-E-36517

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

217.03

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

Amount of Each Disbursement this Period

128.99

Transaction ID : B-E-36569

B. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

Amount of Each Disbursement this Period

112.52

Transaction ID : B-E-36806

C. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Mileage Reimbursement

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2015

Amount of Each Disbursement this Period

16

Transaction ID : B-E-36598

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

257.51

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

PAGE 160 OF 166

<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

Amount of Each Disbursement this Period

64.64

Transaction ID : B-E-36946

B. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2015			

Amount of Each Disbursement this Period

69.26

Transaction ID : B-E-37043

C. Kennedy Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2015			

Amount of Each Disbursement this Period

96.05

Transaction ID : B-E-37108

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

229.95

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Kristi Lynn Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement
Mileage Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		18		2015

Amount of Each Disbursement this Period

553.5

Transaction ID : B-E-36897

B. Kristi Lynn Noem

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101

Purpose of Disbursement
Food/Beverage Reimbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

11.47

Transaction ID : B-E-36987

Original vendors exceeding reporting threshold itemized as memo transactions.

c. Minnehaha Country Club

Mailing Address 3101 W 22nd Street

City	State	Zip Code
Sioux Falls	SD	57105-0101

Purpose of Disbursement
Food/Beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
12		03		2015

Amount of Each Disbursement this Period

5.5

Transaction ID : B-S-1016

[MEMO ITEM]

Subitemization of Kristi Noem(12/03/15)

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

564.97

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Jordan P. Stoick

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		01		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

192.28

Transaction ID : B-E-36518

B. Jordan P. Stoick

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

192.28

Transaction ID : B-E-36570

c. Jordan P. Stoick

Mailing Address PO Box 852

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		02		2015

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

192.28

Transaction ID : B-E-36807

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

576.84

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Jordan P. Stoick

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1	9	2	.	2	8
---	---	---	---	---	---

Transaction ID : B-E-36947

B. Jordan P. Stoick

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1	9	2	.	2	8
---	---	---	---	---	---

Transaction ID : B-E-37044

C. Jordan P. Stoick

Mailing Address PO Box 852

City	State	Zip Code
Sioux Falls	SD	57101-0852

Purpose of Disbursement
Payroll

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

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

Amount of Each Disbursement this Period

1	9	2	.	2	8
---	---	---	---	---	---

Transaction ID : B-E-37109

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

576.84

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

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<input checked="" type="checkbox"/> 17	<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)

Kristi for Congress

Full Name (Last, First, Middle Initial)

A. Burt SugarmanMailing Address 9440 Santa Monica Boulevard
Suite 407City State Zip Code
Beverly Hills CA 90210-4607Purpose of Disbursement
Inkind: Food/Beverage/Parking Service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2015

Amount of Each Disbursement this Period

1442.3

Transaction ID : B-I-36941

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

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

1442.30

124959.19

