



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value=""/>	<input type="text" value="285.75"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8457.01"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="232750.00"/>	<input type="text" value="505450.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="241207.01"/>	<input type="text" value="505735.75"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="221243.86"/>	<input type="text" value="485772.60"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19963.15"/>	<input type="text" value="19963.15"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

MCCONNELL FOR MAJORITY LEADER COMMITTEE

Report Covering the Period: From: 10 / 01 / 2015 To: 12 / 31 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	161750.00	315150.00
(ii) Unitemized .....	0.00	1300.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	161750.00	316450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	71000.00	189000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	232750.00	505450.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	232750.00	505450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	232750.00	505450.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	212.87	9461.73
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	212.87	9461.73
22. Transfers to Affiliated/Other Party Committees.....	221030.99	476310.87
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	221243.86	485772.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	221243.86	485772.60

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	232750.00	505450.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	232750.00	505450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	212.87	9461.73
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	212.87	9461.73

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

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

FOR LINE NUMBER: PAGE 6 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Alfred Altman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10226 Doncastle Ct.  
 City Mechanicsville State VA Zip Code 23116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4618**  
 Amount of Each Receipt this Period  
 1500.00

**B. Steven Bailey**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 341 Fort Mitchell Dr.  
 City Chase City State VA Zip Code 23924  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer S&M Brands Inc. Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4620**  
 Amount of Each Receipt this Period  
 500.00

**C. Robert Bishop**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1916 Forest Hill Lane  
 City Spokane State WA Zip Code 99218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bishop Brokemuhl & Assoc Occupation CLU  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.4622**  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 43
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 3101 S Bishop Jones Pl.

City State Zip Code  
Sioux Falls SD 57103

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

Name of Employer Occupation  
Bockorny Group Inc. President/CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2015

**Transaction ID : SA11AI.4624**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4233 Old Brook Trail

City State Zip Code  
Birmingham AL 35243

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

Name of Employer Occupation  
Capital Strategies Group Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : SA11AI.4626**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 819 Rugby Pl.

City State Zip Code  
Louisville KY 40222

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

Name of Employer Occupation  
Republic Bank & Trust President/COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 15 / 2015

**Transaction ID : SA11AI.4628**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. David Causby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2771 Conley Rd.  
 City Morganton State NC Zip Code 28655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4630**  
 Amount of Each Receipt this Period  
 1000.00

**B. David Causby**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2771 Conley Rd.  
 City Morganton State NC Zip Code 28655  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4631**  
 Amount of Each Receipt this Period  
 1000.00

**C. David Clement**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 Charters St.  
 City New Orleans State LA Zip Code 70116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Clements Insurance Occupation Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 09 / 2015  
**Transaction ID : SA11AI.4633**  
 Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 9 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Ellen Cunanan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7913 Farm Spring Dr.  
 City Prospect State KY Zip Code 40059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4635**  
 Amount of Each Receipt this Period  
 1000.00

**B. Brittani Cushman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2555 Pennsylvania Ave. NW Apt. 809  
 City Washington State DC Zip Code 20037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer National Tobacco Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2015  
**Transaction ID : SA11AI.4637**  
 Amount of Each Receipt this Period  
 1500.00

**C. Rudolph Dana**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8513 Parrotts Landing Dr.  
 City Tampa State FL Zip Code 33647  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4639**  
 Amount of Each Receipt this Period  
 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Paul Diaz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3758 Upper River Rd.  
 City Louisville State KY Zip Code 40207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation CEO/President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4641**  
 Amount of Each Receipt this Period  
 10000.00

**B. James Dobbins**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1006 Monmouth Ave.  
 City Durham State NC Zip Code 27701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer National Tobacco Occupation Senior VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4643**  
 Amount of Each Receipt this Period  
 1500.00

**C. Stephen Farber**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3611 Glenview Ave.  
 City Glenview State KY Zip Code 40025  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4645**  
 Amount of Each Receipt this Period  
 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 14000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 315 W 106th St.  
Apt. 9B

City New York State NY Zip Code 10025

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

Name of Employer Standard General LP Occupation Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
10 / 21 / 2015  
Transaction ID : SA11AI.4647

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 406 Walnut St.

City Texarkana State AR Zip Code 71854

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

Name of Employer Self Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 21 / 2015  
Transaction ID : SA11AI.4649

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1718 D St. NE

City Washington State DC Zip Code 20002

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

Name of Employer Monument Policy Group Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
12 / 15 / 2015  
Transaction ID : SA11AI.4651

Amount of Each Receipt this Period  
1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Thomas Helms**  
Full Name (Last, First, Middle Initial)  
Mailing Address 75 Woods Lane  
City East Hampton State NY Zip Code 11937  
FEC ID number of contributing federal political committee. **C**  
Name of Employer North Atlantic Trading Co. Occupation Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11AI.4653**  
Amount of Each Receipt this Period 1000.00

**B. Bob Hubbard**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2806 Stonegate Dr.  
City Texarkana State AR Zip Code 75503  
FEC ID number of contributing federal political committee. **C**  
Name of Employer EZ Mart Stores Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11AI.4655**  
Amount of Each Receipt this Period 5000.00

**C. Bianca Iodice**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1997 N Greene St.  
City Greenville State NC Zip Code 27834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Purilum Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 01 / 2015  
**Transaction ID : SA11AI.4657**  
Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 9012 Coltsfoot Trce

City Prospect      State KY      Zip Code 40059

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

Name of Employer Kindred Healthcare      Occupation Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015  
**Transaction ID : SA11AI.4659**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address PO Box 612

City Wilson      State NC      Zip Code 27894

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

Name of Employer Tobacco RAJ Processors      Occupation Owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2015  
**Transaction ID : SA11AI.4663**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 2555 Pope Manor Way

City Marietta      State GA      Zip Code 30062

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

Name of Employer Info Requested      Occupation Info Requested

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015  
**Transaction ID : SA11AI.4661**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Camille Kalme**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3502 Hedgewick Pl.  
 City Louisville State KY Zip Code 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4665**  
 Amount of Each Receipt this Period  
 1000.00

**B. Linda Kaltenbach**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1358 Ahlrich Ave.  
 City Encintas State CA Zip Code 92024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.4667**  
 Amount of Each Receipt this Period  
 500.00

**C. Keil & Goodson PA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 406 Walnut St.  
 City Texarkana State AR Zip Code 71854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4538**  
 Amount of Each Receipt this Period  
 10000.00  
 Partner Attribution Requested

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 406 Walnut St.

City State Zip Code  
 Texarkana AR 71854

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

Name of Employer Occupation  
 Self Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4669**

Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. Kessler Topaz Meltzer & Check LLP**

Mailing Address 280 King of Prussia Rd.

City State Zip Code  
 Radnor PA 19087

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4536**

Amount of Each Receipt this Period  
 5000.00

Partner Attribution Requested

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

Mailing Address 4512 Augusta National Dr.

City State Zip Code  
 Floyds Knobs IN 47119

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

Name of Employer Occupation  
 Kindred Healthcare Insurnace

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4671**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Edward Kratovil**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3300 North Vermont St.  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 09 / 2015  
**Transaction ID : SA11AI.4673**  
 Amount of Each Receipt this Period 2500.00

**B. Arjun A Kumar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20660 Weatherstone  
 City Kildeer State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AVG Automation Occupation Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2015  
**Transaction ID : SA11AI.4677**  
 Amount of Each Receipt this Period 5000.00

**C. Pooja Kumar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20660 Weatherstone  
 City Kildeer State IL Zip Code 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Student  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 30 / 2015  
**Transaction ID : SA11AI.4679**  
 Amount of Each Receipt this Period 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

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

FOR LINE NUMBER: PAGE 17 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Shalabh Kumar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20660 Weatherstone  
 City State Zip Code  
 Kildeer IL 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AVG Automation Chairman/CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015  
**Transaction ID : SA11AI.4683**  
 Amount of Each Receipt this Period  
 5000.00

**B. Shama Kumar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20660 Weatherstone  
 City State Zip Code  
 Kildeer IL 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Homemaker Homemaker  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015  
**Transaction ID : SA11AI.4675**  
 Amount of Each Receipt this Period  
 5000.00

**C. Vikram Aditya Kumar**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 20660 Weatherstone  
 City State Zip Code  
 Kildeer IL 60047  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AVG Automation President  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015  
**Transaction ID : SA11AI.4681**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 18 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Joseph Landenwich**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1822 Casselberry Rd.  
 City Louisville State KY Zip Code 40205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2015  
**Transaction ID : SA11AI.4685**  
 Amount of Each Receipt this Period 1000.00

**B. Ronald Lazas**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9603 West View Ct.  
 City Crestwood State KY Zip Code 40014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Kindred Healthcare Occupation SVP and Chief Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2015  
**Transaction ID : SA11AI.4687**  
 Amount of Each Receipt this Period 1000.00

**C. Mark Loyd**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3022 Wickland Rd.  
 City Louisville State KY Zip Code 40205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bingham Greenebaum Doll LLP Occupation Chair, Tax & Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11AI.4689**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 19 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. John Lucchese**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14401 Broad Oak Pl.  
 City State Zip Code  
 Louisville KY 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Kindred Healthcare Executive  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4691**  
 Amount of Each Receipt this Period  
 1000.00

**B. Jed Manocherian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 E 50th St.  
 City State Zip Code  
 New York NY 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Woodbranch Investments Real Estate  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4697**  
 Amount of Each Receipt this Period  
 10000.00

**C. Jonathan Manocherian**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 18 E 50th St.  
 City State Zip Code  
 New York NY 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Student  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4695**  
 Amount of Each Receipt this Period  
 10000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 21000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 20 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 18 E 50th St.

City New York      State NY      Zip Code 10022

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

Name of Employer N/A      Occupation Student

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4693**

Amount of Each Receipt this Period  
10000.00

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

Mailing Address 413 Jarvis Ln.

City Louisville      State KY      Zip Code 40207

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

Name of Employer McCarthy & Speaks      Occupation Consultant

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4699**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 3535 Gillespie St.  
#407

City Dallas      State TX      Zip Code 75219

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

Name of Employer Self      Occupation Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4701**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 3682 Briarcliff Trace

City Owensboro State KY Zip Code 42303

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

Name of Employer Enduracoat Technologies Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : SA11AI.4703**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 508 W Melrose St. #7A

City Chicago State IL Zip Code 60657

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

Name of Employer Kindred Healthcare Occupation President, Hospital Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.4705**

Amount of Each Receipt this Period  
 1000.00

**C. Lisa Monk-Miller**  
Full Name (Last, First, Middle Initial)

Mailing Address 3516 Dearborn Cir.

City Bryant State AR Zip Code 72022

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

Name of Employer M&M Strategies Occupation Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : SA11AI.4707**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 43
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 161 Westwind Rd.

City Louisville	State KY	Zip Code 40207
--------------------	-------------	-------------------

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

Name of Employer Kindred Healthcare	Occupation Communications
----------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID : SA11AI.4709**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 10010 Skinner Lake Dr.  
#532

City Jacksonville	State FL	Zip Code 32246
----------------------	-------------	-------------------

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

Name of Employer Arc Brands	Occupation Managing Member
--------------------------------	-------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

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

**Transaction ID : SA11AI.4711**

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 436 Hillcrest Ave.

City Louisville	State KY	Zip Code 40206
--------------------	-------------	-------------------

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

Name of Employer Info Requested	Occupation Info Requested
------------------------------------	------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : SA11AI.4713**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 23 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 1803 Sylvan Way

City State Zip Code  
 Goshen KY 40026

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

Name of Employer Occupation  
 National Tobacco VP Sales

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2015

**Transaction ID : SA11AI.4715**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1849 Lamount St., NW

City State Zip Code  
 Washington DC 20010

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

Name of Employer Occupation  
 Amgen Executive

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2015

**Transaction ID : SA11AI.4716**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 940 Swinks Mill Rd.

City State Zip Code  
 McLean VA 22102

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

Name of Employer Occupation  
 The Russell Group Partner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11AI.4718**

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 2704 Howard Grove Rd.

City Davidsonville State MD Zip Code 21035

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

Name of Employer The Duberstein Group, Inc. Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
12 / 01 / 2015  
Transaction ID : SA11AI.4720

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1348 Constitution Ave. NE

City Washington State DC Zip Code 20002

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

Name of Employer CGCN Group Occupation VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
11 / 23 / 2015  
Transaction ID : SA11AI.4722

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2346 S Nash St.

City Arlington State VA Zip Code 22202

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

Name of Employer Ogilvy Government Relations Occupation Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
12 / 01 / 2015  
Transaction ID : SA11AI.4724

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 2500.00

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



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

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

FOR LINE NUMBER: PAGE 25 OF 43  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Amy Swonger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5905 Moss Wood Ln.  
 City McLean State VA Zip Code 22101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ernst & Young Occupation Lobbyist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11AI.4726**  
 Amount of Each Receipt this Period  
 1000.00

**B. Michael Terry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9501 Gerardia Ln.  
 City Prospect State KY Zip Code 40059  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Info Requested Occupation Info Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4728**  
 Amount of Each Receipt this Period  
 500.00

**C. Jack Underwood**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2000 Waterfront Placa  
 325 W Main St.  
 City Louisville State KY Zip Code 40202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Conliffe Sandman & Sullivan Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2015  
**Transaction ID : SA11AI.4730**  
 Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 2447 Hidden River Ln.

City Franklin State TN Zip Code 37069

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

Name of Employer Kindred Healthcare Occupation EVP/COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 15 / 2015  
**Transaction ID : SA11AI.4732**

Amount of Each Receipt this Period 5000.00

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

Mailing Address 4350 Brownsboro Rd. Ste. 310

City Louisville State KY Zip Code 40207

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

Name of Employer SMC Advisors Occupation General Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 15 / 2015  
**Transaction ID : SA11AI.4734**

Amount of Each Receipt this Period 1000.00

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

Mailing Address 393 Carter St.

City New Canaan State CT Zip Code 06840

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

Name of Employer National Tobacco Occupation President/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11AI.4736**

Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Wiley Rein LLP**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1776 K St., NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 22 / 2015  
**Transaction ID : SA11AI.4595**

Amount of Each Receipt this Period  
5000.00

See Partner Memos

**B. Philip Davis**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1776 K St., NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer Wiley ReinLLP	Occupation Attorney
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
12 / 22 / 2015  
**Transaction ID : SA11AI.4595.0**

Amount of Each Receipt this Period  
500.00

Partner Memo  
**[MEMO ITEM]**

**C. Jennifer Hindin**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1776 K St., NW

City Washington	State DC	Zip Code 20006
--------------------	-------------	-------------------

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

Name of Employer Wiley ReinLLP	Occupation Attorney
-----------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
12 / 22 / 2015  
**Transaction ID : SA11AI.4595.1**

Amount of Each Receipt this Period  
500.00

Partner Memo  
**[MEMO ITEM]**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley ReinLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.2**

Amount of Each Receipt this Period  
 500.00

Partner Memo  
**[MEMO ITEM]**

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley ReinLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.3**

Amount of Each Receipt this Period  
 500.00

Partner Memo  
**[MEMO ITEM]**

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley ReinLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.4**

Amount of Each Receipt this Period  
 500.00

Partner Memo  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Carol Laham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1776 K St., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wiley ReinLLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.5**  
 Amount of Each Receipt this Period  
 500.00  
 Partner Memo  
**[MEMO ITEM]**

**B. Kevin Maynard**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1776 K St., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wiley ReinLLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.6**  
 Amount of Each Receipt this Period  
 500.00  
 Partner Memo  
**[MEMO ITEM]**

**C. Andrew McBride**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1776 K St., NW  
 City Washington State DC Zip Code 20006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wiley ReinLLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.7**  
 Amount of Each Receipt this Period  
 500.00  
 Partner Memo  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley ReinLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.8**

Amount of Each Receipt this Period  
 500.00

Partner Memo  
**[MEMO ITEM]**

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

Mailing Address 1776 K St., NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley ReinLLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015  
**Transaction ID : SA11AI.4595.9**

Amount of Each Receipt this Period  
 500.00

Partner Memo  
**[MEMO ITEM]**

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

Mailing Address 1004 Anchorage Woods Cir.

City Louisville State KY Zip Code 40223

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

Name of Employer Kindred Healthcare Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015  
**Transaction ID : SA11AI.4738**

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 31 OF 43  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. Arnold Zimmerman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 925 Park Ave.  
Apt. 2A  
City New York State NY Zip Code 10028  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Info Requested Info Requested  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 01 / 2015  
**Transaction ID : SA11AI.4740**  
Amount of Each Receipt this Period  
250.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

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

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	161750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. ALLSTATE INSURANCE COMPANY PAC**

Mailing Address 2775 SANDERS ROAD SUITE A2W

City NORTHBROOK State IL Zip Code 60062

FEC ID number of contributing federal political committee. **C** C00040253

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 30 / 2015

**Transaction ID : SA11C.4574**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)**

Mailing Address 222 SOUTH PROSPECT AVE  
C/O FINANCE DEPARTMENT

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 22 / 2015

**Transaction ID : SA11C.4571**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2015

**Transaction ID : SA11C.4566**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12500.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ARENT FOX LLP PAC (AFPAC)</b>		Date of Receipt
Mailing Address ARENT FOX LLP 1717 K STREET NW		<input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C00241380"/>	<b>Transaction ID : SA11C.4553</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. CBS CORPORATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt
Mailing Address 601 PENNSYLVANIA AVE NW SUITE 540		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2015"/>
City	State	Zip Code
WASHINGTON	DC	20004
FEC ID number of contributing federal political committee.	<input type="text" value="C00423442"/>	<b>Transaction ID : SA11C.4542</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) <b>C. CENTENE CORPORATION POLITICAL ACTION COMMITTEE (CENTENE PAC)</b>		Date of Receipt
Mailing Address CENTENE PLAZA 7700 FORSYTH BLVD.		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
ST. LOUIS	MO	63105
FEC ID number of contributing federal political committee.	<input type="text" value="C00397851"/>	<b>Transaction ID : SA11C.4547</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="2000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. CINTAS CORPORATION PARTNERS PAC**

Mailing Address 6800 CINTAS BOULEVARD

City	State	Zip Code
MASON	OH	45040

FEC ID number of contributing federal political committee. **C** C00449165

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

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

**Transaction ID : SA11C.4579**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. DUNKIN' BRANDS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 130 ROYALL STREET

City	State	Zip Code
CANTON	MA	02021

FEC ID number of contributing federal political committee. **C** C00431544

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2015

**Transaction ID : SA11C.4533**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. FOOD MARKETING INSTITUTE POLITICAL ACTION COMMITTEE FOODPAC**

Mailing Address 2345 CRYSTAL DRIVE  
SUITE 800

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

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

**Transaction ID : SA11C.4586**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. FRIENDS OF MEDICAL RESEARCH POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 INDEPENDENCE AVENUE SE  
 City WASHINGTON State DC Zip Code 20003  
 FEC ID number of contributing federal political committee. **C** C00566042  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 21 / 2015  
**Transaction ID : SA11C.4540**  
 Amount of Each Receipt this Period 10000.00

**B. GROCERY MANUFACTURERS ASSOCIATION POLITICAL ACTION COMMITTEE ('GMA PAC')**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1350 EYE STREET SUITE 300  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00250068  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2015  
**Transaction ID : SA11C.4581**  
 Amount of Each Receipt this Period 2500.00

**C. INTERNATIONAL DAIRY FOODS ASSOCIATION (IDFA) - ICE CREAM, MILK & CHEESE PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1250 H STREET, NW SUITE 900  
 City WASHINGTON State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00128231  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 01 / 2015  
**Transaction ID : SA11C.4557**  
 Amount of Each Receipt this Period 2500.00

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

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

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

FOR LINE NUMBER: PAGE 36 OF 43  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. MONDELEZ INTERNATIONAL, INC. PAC**  
 Mailing Address 975 F STREET, NW  
 City State Zip Code  
 WASHINGTON DC 20004  
 FEC ID number of contributing federal political committee. **C** C00529073  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11C.4590**  
 Amount of Each Receipt this Period  
 2500.00

Full Name (Last, First, Middle Initial)  
**B. MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE**  
 Mailing Address 1600 I STREET, NW  
 City State Zip Code  
 WASHINGTON DC 20006  
 FEC ID number of contributing federal political committee. **C** C00139519  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 01 / 2015  
**Transaction ID : SA11C.4560**  
 Amount of Each Receipt this Period  
 3000.00

Full Name (Last, First, Middle Initial)  
**C. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**  
 Mailing Address 1771 N STREET NW  
 City State Zip Code  
 WASHINGTON DC 20036  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2015  
**Transaction ID : SA11C.4588**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City State Zip Code  
CORDOVA TN 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : SA11C.4576**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Mailing Address 50 F STREET NW  
SUITE 900

City State Zip Code  
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00002238

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2015

**Transaction ID : SA11C.4562**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL INDIAN GAMING ASSOCIATION SOVEREIGNTY PAC

Mailing Address 224 2ND STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00367177

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2015

**Transaction ID : SA11C.4583**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 43
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. NATIONAL PORK PRODUCERS COUNCIL PORK PAC**

Mailing Address **PO BOX 10383**

City <b>DES MOINES</b>	State <b>IA</b>	Zip Code <b>50306</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00201871**

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt  

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

**Transaction ID : SA11C.4564**

Amount of Each Receipt this Period  

2500.00
---------

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

Mailing Address **2001 EDMUND HALLEY DR. V224A**

City <b>RESTON</b>	State <b>VA</b>	Zip Code <b>20191</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00331835**

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

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

**Transaction ID : SA11C.4568**

Amount of Each Receipt this Period  

1000.00
---------

Full Name (Last, First, Middle Initial)  
**C. POLYONE CORP. POLITICAL ACTION COMMITTEE**

Mailing Address **33587 WALKER ROAD**

City <b>AVON LAKE</b>	State <b>OH</b>	Zip Code <b>44012</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00288712**

Name of Employer	Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  

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

**Transaction ID : SA11C.4551**

Amount of Each Receipt this Period  

1000.00
---------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. SMALL BUSINESS INVESTOR ALLIANCE PAC**

Mailing Address 1100 H STREET, NW  
SUITE 610

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00109991

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 01 / 2015

**Transaction ID : SA11C.4555**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. TWENTY-FIRST CENTURY FOX, INC. PAC (FOX PAC)**

Mailing Address 400 NORTH CAPITOL STREET, NW  
SUITE 890

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00330019

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 09 / 2015

**Transaction ID : SA11C.4544**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 1501 M STREET  
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00167759

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
11 / 23 / 2015

**Transaction ID : SA11C.4549**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 43  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	-----------------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

**A. WATERPAC - NATIONAL RURAL WATER ASSOCIATION POLITICAL COMMITTEE**  
Full Name (Last, First, Middle Initial)

Mailing Address 2915 SOUTH 13TH

City DUNCAN State OK Zip Code 73533

FEC ID number of contributing federal political committee. **C** C00202184

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2015

**Transaction ID : SA11C.4592**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	71000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 03 / 2015

**Transaction ID : SB21B.4747**

Amount of Each Disbursement this Period

24.95

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Authorize.net**

Mailing Address PO Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2015

**Transaction ID : SB21B.4749**

Amount of Each Disbursement this Period

24.95

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2015

**Transaction ID : SB21B.4746**

Amount of Each Disbursement this Period

46.10

Category/  
Type

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

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

96.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BB&T**

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Merchant Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB21B.4748**

Amount of Each Disbursement this Period

4	5	.	9	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BB&T**

Mailing Address 1909 K St., NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Merchant FEe

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB21B.4750**

Amount of Each Disbursement this Period

4	5	.	9	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

9	1	.	8	0
---	---	---	---	---

1	8	.	7	8	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BLUEGRASS COMMITTEE**

Mailing Address 220 1/2 E ST., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
Distribution of Net JFC Proceeds

008

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : SB22.4741

Amount of Each Disbursement this Period

173085.68

Full Name (Last, First, Middle Initial)

**B. MCCONNELL SENATE COMMITTEE**

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement  
Distribution of Net JFC proceeds

008

Candidate Name

**MITCH MCCONNELL**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: KY District: 00

Date of Disbursement

MM / DD / YYYY  
12 / 31 / 2015

Transaction ID : SB22.4743

Amount of Each Disbursement this Period

47945.31

Full Name (Last, First, Middle Initial)

**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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

221030.99

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

221030.99