

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Automotive Free International Trade PAC

ADDRESS (number and street) 1625 Prince St. Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00250399 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2015 through 01 / 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 Jim Norton

Signature of Treasurer Jim Norton [Electronically Filed] Date 02 / 18 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Automotive Free International Trade PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		539878.29
(b) Cash on Hand at Beginning of Reporting Period.....	539878.29	
(c) Total Receipts (from Line 19) .....	28912.96	28912.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	568791.25	568791.25
7. Total Disbursements (from Line 31).....	61810.55	61810.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	506980.70	506980.70
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**Automotive Free International Trade PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28750.00	28750.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	28750.00	28750.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28750.00	28750.00
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.).....	162.96	162.96
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))..... ▶	28912.96	28912.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28912.96	28912.96

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	61810.55	61810.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	61810.55	61810.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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)) ..	61810.55	61810.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61810.55	61810.55

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	28750.00	28750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28750.00	28750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	61810.55	61810.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	61810.55	61810.55

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN

Transaction ID :

All expenditures detailed on line 21b are operating expenditures and are made on behalf of the committee itself and not on behalf of a candidate or another committee.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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)  
**Automotive Free International Trade PAC**

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

Mailing Address 8500 Summerhouse Rd

City State Zip Code  
Cincinnati OH 45243-4218

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

Name of Employer Occupation  
Automanage, Inc. 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  
 01 / 07 / 2015  
**Transaction ID : C2906787**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Fred E. Haas Jr.**

Mailing Address 8815 Stable Crest Blvd

City State Zip Code  
Houston TX 77024-7035

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

Name of Employer Occupation  
Fred Haas Toyota Dealer Principal

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  
 01 / 08 / 2015  
**Transaction ID : C2906909**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 9101 Alta Dr  
Unit 1204

City State Zip Code  
Las Vegas NV 89145-8541

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

Name of Employer Occupation  
Hitchcock Automotive Resources Chairman/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  
 01 / 30 / 2015  
**Transaction ID : C2922464**

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 12000.00

**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 8 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial) <b>A. Bradley Hoffman</b>		Date of Receipt
Mailing Address 20 Deer Ridge Rd		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>
City	State	Zip Code
Avon	CT	06001-2882
FEC ID number of contributing federal political committee.		Transaction ID : <b>C2906959</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Hoffman Porsche	Co-Chairman	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. David R. Hudson</b>		Date of Receipt
Mailing Address 2019 Purcell Ln		<input type="text" value="01"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City	State	Zip Code
Daniel Island	SC	29492-8414
FEC ID number of contributing federal political committee.		Transaction ID : <b>C2907170</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
Hudson Automotive	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Lawrence Kull</b>		Date of Receipt
Mailing Address 3 Bradford Court		<input type="text" value="01"/> / <input type="text" value="07"/> / <input type="text" value="2015"/>
City	State	Zip Code
Medford	NJ	08055-8180
FEC ID number of contributing federal political committee.		Transaction ID : <b>C2906786</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	
Burns Kull Auto Group	President	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="11000.00"/>
<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: PAGE 9 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Automotive Free International Trade PAC**

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

Mailing Address 13727 Creekside Pl

City State Zip Code  
Dallas TX 75240-3551

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

Name of Employer Occupation  
Classic BMW 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  
 01 / 07 / 2015  
**Transaction ID : C2906788**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 4332 Emory Ave

City State Zip Code  
Baton Rouge LA 70808-4616

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

Name of Employer Occupation  
Team Toyota GM

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 08 / 2015  
**Transaction ID : C2906910**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 14319 178th Ln NE

City State Zip Code  
Woodinville WA 98072-9314

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

Name of Employer Occupation  
The Seven Motor Corporation Dealer

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  
 01 / 30 / 2015  
**Transaction ID : C2921992**

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	28750.00

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
credit card fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2015

Transaction ID : D164472

Amount of Each Disbursement this Period

562.75

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement  
credit card fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2015

Transaction ID : D164473

Amount of Each Disbursement this Period

632.91

Full Name (Last, First, Middle Initial)

**C. ASIS International**

Mailing Address PO Box 17673

City Baltimore State MD Zip Code 21297-1673

Purpose of Disbursement  
rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 28 / 2015

Transaction ID : D164401

Amount of Each Disbursement this Period

3438.15

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

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

4633.81

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. ASIS International**

Mailing Address PO Box 17673

City Baltimore State MD Zip Code 21297-1673

Purpose of Disbursement security deposit

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2015

**Transaction ID : D164273**

Amount of Each Disbursement this Period

361.21

Full Name (Last, First, Middle Initial)

**B. Authorize.net**

Mailing Address 915 South 500 East Suite200

City American Fork State UT Zip Code 84003

Purpose of Disbursement credit card fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 05 / 2015

**Transaction ID : D164470**

Amount of Each Disbursement this Period

31.25

Full Name (Last, First, Middle Initial)

**C. BB&T Insurance Services**

Mailing Address P.O. Box 890635

City Charlotte State NC Zip Code 28289

Purpose of Disbursement insurance premium

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2015

**Transaction ID : D163846**

Amount of Each Disbursement this Period

3135.00

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

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

3527.46

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Bernadette Cala**

Mailing Address 1625 Prince Street  
Suite 225

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 15 / 2015

**Transaction ID : D164282**

Amount of Each Disbursement this Period

1562.09

Full Name (Last, First, Middle Initial)

**B. Bernadette Cala**

Mailing Address 1625 Prince Street  
Suite 225

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2015

**Transaction ID : D164465**

Amount of Each Disbursement this Period

1662.09

Full Name (Last, First, Middle Initial)

**C. Burke & Herbert**

Mailing Address 118 S. Fairfax Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
bank fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2015

**Transaction ID : D164479**

Amount of Each Disbursement this Period

10.00

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

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

3234.18

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First Street, S.E.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
mtg. exp. - food, dues

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D164349**

Amount of Each Disbursement this Period

2	9	8	.	1	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Petty Cash**

Mailing Address 1625 Prince St  
Ste 225

City Alexandria State VA Zip Code 22314-2882

Purpose of Disbursement  
replenish

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D164236**

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FedEx Corporation**

Mailing Address P.O. Box 1140  
Department A

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
express shipping

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

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

**Transaction ID : D163938**

Amount of Each Disbursement this Period

1	3	0	6	.	3	4
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

1	8	0	4	.	4	4
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**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial) <b>A. Mary Dreape Hanagan</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 4620 Newcomb PI		<b>Transaction ID : D164283</b>
City Alexandria	State VA	
Purpose of Disbursement payroll		Amount of Each Disbursement this Period 4020.22
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Mary Dreape Hanagan</b>		Date of Disbursement MM / DD / YYYY 01 / 16 / 2015
Mailing Address 4620 Newcomb PI		<b>Transaction ID : D164247</b>
City Alexandria	State VA	
Purpose of Disbursement mtg.exp. - food, taxi, meeting room		Amount of Each Disbursement this Period 400.00
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Mary Dreape Hanagan</b>		Date of Disbursement MM / DD / YYYY 01 / 30 / 2015
Mailing Address 4620 Newcomb PI		<b>Transaction ID : D164467</b>
City Alexandria	State VA	
Purpose of Disbursement payroll		Amount of Each Disbursement this Period 4020.21
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8440.43
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Lisa Emig**

Mailing Address 1625 Prince Street  
Suite 225

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2015

**Transaction ID : D164466**

Amount of Each Disbursement this Period

1848.08

Full Name (Last, First, Middle Initial)

**B. Lisa Emig**

Mailing Address 1625 Prince Street  
Suite 225

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payroll

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 15 / 2015

**Transaction ID : D164281**

Amount of Each Disbursement this Period

1848.08

Full Name (Last, First, Middle Initial)

**C. Lorien Hotel**

Mailing Address 1600 King Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
parking

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 28 / 2015

**Transaction ID : D164403**

Amount of Each Disbursement this Period

250.00

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

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

3946.16

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Merchant Services**

Mailing Address 7300 Chapman Highway

City Knoxville State TN Zip Code 37920

Purpose of Disbursement  
credit card fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 05 / 2015

**Transaction ID : D164474**

Amount of Each Disbursement this Period

1076.48

Full Name (Last, First, Middle Initial)

**B. Mission Media**

Mailing Address 616 Water Street  
Suite 225

City Baltimore State MD Zip Code 21202

Purpose of Disbursement  
website hosting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 15 / 2015

**Transaction ID : D164240**

Amount of Each Disbursement this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Paychex, Inc.**

Mailing Address P.O. Box 2950

City Merrifield State VA Zip Code 22116-2950

Purpose of Disbursement  
payroll fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 15 / 2015

**Transaction ID : D164476**

Amount of Each Disbursement this Period

181.03

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

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

1307.51



**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Paychex, Inc.**

Mailing Address P.O. Box 2950

City Merrifield State VA Zip Code 22116-2950

Purpose of Disbursement  
payroll fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		30		2015

**Transaction ID : D164477**

Amount of Each Disbursement this Period

80.13
-------

Full Name (Last, First, Middle Initial)

**B. PowerPay**

Mailing Address 5 Milk Street

City Portland State ME Zip Code 04101

Purpose of Disbursement  
credit card fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		05		2015

**Transaction ID : D164471**

Amount of Each Disbursement this Period

99.32
-------

Full Name (Last, First, Middle Initial)

**C. Principal Financial Group**

Mailing Address 11 West State Street

City Mason City State IA Zip Code 50401

Purpose of Disbursement  
401k contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		06		2015

**Transaction ID : D164475**

Amount of Each Disbursement this Period

2603.34
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

2782.79
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**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial) <b>A. Principal Financial Group</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 11 West State Street		<b>Transaction ID : D163897</b>
City Mason City	State IA	
Purpose of Disbursement 401k contribution	Candidate Name	Amount of Each Disbursement this Period 18150.01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Principal Financial Group</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2015
Mailing Address 11 West State Street		<b>Transaction ID : D164478</b>
City Mason City	State IA	
Purpose of Disbursement 401k fee	Candidate Name	Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. SHL and Associates, Inc.</b>		Date of Disbursement MM / DD / YYYY 01 / 28 / 2015
Mailing Address 1220 North Fillmore Street Suite 400		<b>Transaction ID : D164402</b>
City Arlington	State VA	
Purpose of Disbursement political consultant - communication	Candidate Name	Amount of Each Disbursement this Period 600.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	19250.01
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address Dept 85 - 0000084282  
P.O. Box 30292

City State Zip Code  
Salt Lake City UT 84130-0292

Purpose of Disbursement  
office supplies

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 20 / 2015

**Transaction ID : D164274**

Amount of Each Disbursement this Period

212.34

Full Name (Last, First, Middle Initial)

**B. The Hill**

Mailing Address 733 15th Street, N.W.  
Suite 1140

City State Zip Code  
Washington DC 20005

Purpose of Disbursement  
subscription

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 15 / 2015

**Transaction ID : D164237**

Amount of Each Disbursement this Period

225.00

Full Name (Last, First, Middle Initial)

**C. United Bank**

Mailing Address 1414 Prince Street

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
payroll withholding tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 15 / 2015

**Transaction ID : D164284**

Amount of Each Disbursement this Period

5416.65

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

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

5853.99

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. United Bank**

Mailing Address 1414 Prince Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
payroll withholding tax

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 30 / 2015

**Transaction ID : D164468**

Amount of Each Disbursement this Period

5233.92

Full Name (Last, First, Middle Initial)

**B. Utrecht, Kleinfeld, Fiori, Partners**

Mailing Address 1900 M. Street, NW  
Suite 500

City Washington State DC Zip Code 20036

Purpose of Disbursement  
legal fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 28 / 2015

**Transaction ID : D164390**

Amount of Each Disbursement this Period

834.90

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P.O. Box 17398

City Baltimore State MD Zip Code 21297-0429

Purpose of Disbursement  
cellular phone

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
01 / 15 / 2015

**Transaction ID : D164238**

Amount of Each Disbursement this Period

106.91

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

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

6175.73

**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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

**A. XO Communications Services, Inc**

Mailing Address 14242 Collections Center Drive

City Chicago State IL Zip Code 60693-0142

Purpose of Disbursement  
monthly phone service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2015

**Transaction ID : D164239**

Amount of Each Disbursement this Period

572.57

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. American Express Travel**

Mailing Address P.O. Box 650448

City Dallas State TX Zip Code 75268

Purpose of Disbursement  
Credit card payment (see itemized)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2015

**Transaction ID : D164275**

Amount of Each Disbursement this Period

281.47

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Carlyle Grand Cafe**

Mailing Address 4000 S. 28th Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement  
mtg.exp. - food (see Am.Ex. disbursement)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 20 / 2015

**Transaction ID : D164276**

Amount of Each Disbursement this Period

71.68

Category/  
Type

**[MEMO ITEM]**

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

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

854.04

# 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)  
**Automotive Free International Trade PAC**

Full Name (Last, First, Middle Initial)

### A. Mozy

Mailing Address 2211 Elliott Ave., Suite 300

City State Zip Code  
Seattle WA 98121

Purpose of Disbursement  
computer software (see Am.Ex. disbursement)

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Transaction ID : D164359

Amount of Each Disbursement this Period

2	0	9	.	7	9
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

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

0	.	0	0
---	---	---	---

6	1	8	1	0	.	5	5
---	---	---	---	---	---	---	---