



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Materion Corporation Political Action 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"/>		30570.19
(b) Cash on Hand at Beginning of Reporting Period.....	31047.93	
(c) Total Receipts (from Line 19) .....	4336.48	7656.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35384.41	38226.72
7. Total Disbursements (from Line 31).....	2352.43	5194.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	33031.98	33031.98
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Materion Corporation Political Action Committee**

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).....	3522.32	4962.32
(ii) Unitemized .....	807.59	2681.97
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4329.91	7644.29
(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) .....	4329.91	7644.29
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.).....	6.57	12.24
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))..... ▶	4336.48	7656.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4336.48	7656.53

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

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 .....	352.43	694.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	352.43	694.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	4500.00
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)) ..	2352.43	5194.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2352.43	5194.74

**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) .....	4329.91	7644.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4329.91	7644.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	352.43	694.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	352.43	694.74

**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 6 OF 12
<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

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)  
**Materion Corporation Political Action Committee**

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Services, Inc. Director, Corporate Communications

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
399.88

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**Transaction ID : SA11AI.5891**

Amount of Each Receipt this Period  
215.32

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Advanced Materials Te Vice President, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**Transaction ID : SA11AI.5900**

Amount of Each Receipt this Period  
175.00

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Brush Inc. Senior Black Belt

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**Transaction ID : SA11AI.5909**

Amount of Each Receipt this Period  
112.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 502.32

**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 7 OF 12  
(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)  
**Materion Corporation Political Action Committee**

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

Mailing Address 6070 Parkland Boulevard

City Mayfield Heights	State OH	Zip Code 44124
--------------------------	-------------	-------------------

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

Name of Employer Materion Services, Inc.	Occupation Chief Financial Officer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.5892**

Amount of Each Receipt this Period  
140.00

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

Mailing Address 6070 Parkland Boulevard

City Mayfield Heights	State OH	Zip Code 44124
--------------------------	-------------	-------------------

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

Name of Employer Materion Services, Inc.	Occupation Chief Executive Officer
---	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1625.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.5893**

Amount of Each Receipt this Period  
875.00

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

Mailing Address 6070 Parkland Boulevard

City Mayfield Heights	State OH	Zip Code 44124
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FEC ID number of contributing federal political committee. **C**

Name of Employer Materion Advanced Materials	Occupation Vice President, Operations
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015  
**Transaction ID : SA11AI.5894**

Amount of Each Receipt this Period  
280.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1295.00
<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 12  
(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)  
**Materion Corporation Political Action Committee**

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Brush Inc. Director, Product Stewardship

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : SA11AI.5903

Amount of Each Receipt this Period  
140.00

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Brush Inc. Vice President, EH&S

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
455.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : SA11AI.5904

Amount of Each Receipt this Period  
245.00

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Brush Inc. Manager, Primary Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

Transaction ID : SA11AI.5912

Amount of Each Receipt this Period  
140.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 525.00

**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 12  
(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)  
**Materion Corporation Political Action Committee**

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

Mailing Address 6070 Parkland Blvd.

City	State	Zip Code
MAYFIELD HEIGHTS	OH	44124

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

Name of Employer	Occupation
MATERION CORPORATION	MANAGER

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  
 06 / 30 / 2015

**Transaction ID : SA11AI.5923**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 6070 Parkland Boulevard

City	State	Zip Code
Mayfield Heights	OH	44124

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

Name of Employer	Occupation
Materion Brush Inc.	Service Center Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : SA11AI.5919**

Amount of Each Receipt this Period  
140.00

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

Mailing Address 6070 Parkland Boulevard

City	State	Zip Code
Mayfield Heights	OH	44124

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

Name of Employer	Occupation
Materion Brush Inc.	Director, Business Development

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : SA11AI.5914**

Amount of Each Receipt this Period  
140.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	780.00
<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 10 OF 12  
(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)  
**Materion Corporation Political Action Committee**

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Advanced Materials President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.5902**

Amount of Each Receipt this Period  
280.00

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

Mailing Address 6070 Parkland Boulevard

City State Zip Code  
Mayfield Heights OH 44124

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

Name of Employer Occupation  
Materion Services, Inc. Vice President, Human Resources

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
06 / 30 / 2015  
**Transaction ID : SA11AI.5906**

Amount of Each Receipt this Period  
140.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	420.00
<b>TOTAL</b> This Period (last page this line number only).....▶	3522.32

**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)

**Materion Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. J.P. Morgan Chase Bank, N.A.**

Mailing Address P.O. Box 260180

City State Zip Code  
Baton Rouge LA 70826-0180

Purpose of Disbursement  
Bank Fees

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  
06 / 30 / 2015

**Transaction ID : SB21B.5931**

Amount of Each Disbursement this Period

352.43

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)..... ▶

352.43

352.43

**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 type="checkbox"/> 22	<input checked="" 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)

**Materion Corporation Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. CHARLIE DENT FOR CONGRESS**

Mailing Address PO BOX 442

City ALLENTOWN State PA Zip Code 18105

Purpose of Disbursement  
Cmpaign Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: PA District: 15

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 04 / 2015

**Transaction ID : SB23.5925**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Citizens for Gardner**

Mailing Address 409 South Mitchell Road

City Bowling Green State OH Zip Code 43402

Purpose of Disbursement  
Campaign Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB23.5929**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

Amount of Each Disbursement this Period

Category/  
Type

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

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

2000.00

2000.00