

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.
WOLF PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on in the State of
(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 / 01 / 2016 through 06 / 30 / 2016

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 David Koller

Signature of Treasurer David Koller [Electronically Filed] Date 07 / 14 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WOLF 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="2016"/>	<input type="text" value="133183.11"/>	<input type="text" value="133183.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="91603.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="84232.05"/>	<input type="text" value="172843.42"/>
(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="175835.75"/>	<input type="text" value="306026.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="104610.76"/>	<input type="text" value="234801.54"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="71224.99"/>	<input type="text" value="71224.99"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WOLF PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2016 To: M M / D D / Y Y Y Y 06 / 30 / 2016

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).....	9675.00	14725.00
(ii) Unitemized	74438.25	156068.22
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	84113.25	170793.22
(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)	84113.25	170793.22
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).....	118.80	2050.20
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))..... ▶	84232.05	172843.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	84232.05	172843.42

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	99610.76	205801.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	99610.76	205801.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
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	24000.00
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)) ..	104610.76	234801.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	104610.76	234801.54

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)	84113.25	170793.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	84113.25	170793.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	99610.76	205801.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	118.80	2050.20
38. Net Operating Expenditures (subtract Line 37 from Line 36)	99491.96	203751.34

**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 124
	<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	

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)
WOLF PAC

A. Joseph Adams
 Full Name (Last, First, Middle Initial)
 Mailing Address 1405 Berwick Rd.
 City Towson State MD Zip Code 21204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Turning Point Clinic Occupation Physician
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 06 / 13 / 2016
Transaction ID : SA11AI.20552
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. David Alexander
 Full Name (Last, First, Middle Initial)
 Mailing Address 6374 Greenway Rd
 City Fort Worth State TX Zip Code 76116
 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 ▼
 250.00

Date of Receipt
 05 / 28 / 2016
Transaction ID : SA11AI.20560
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. David Alexander
 Full Name (Last, First, Middle Initial)
 Mailing Address 6374 Greenway Rd
 City Fort Worth State TX Zip Code 76116
 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 ▼
 300.00

Date of Receipt
 06 / 28 / 2016
Transaction ID : SA11AI.20561
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 7 OF 124
	(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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Chris Allsberry

Mailing Address 2455 Union Blvd 1A

City State Zip Code
Islip NY 11751

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

Name of Employer Occupation
Broadridge Financial Solutions Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2016

Transaction ID : SA11AI.20572

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Christine Bell

Mailing Address 9541 Signal Ct.

City State Zip Code
Sacramento CA 95827

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2016

Transaction ID : SA11AI.20608

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Michael Bell

Mailing Address 9541 Signal Ct

City State Zip Code
Sacramento CA 95827

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

Name of Employer Occupation
Guided Wave Inc. Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 15 / 2016

Transaction ID : SA11AI.20613

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 124
	<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)
WOLF PAC

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

Mailing Address 9541 Signal Ct

City Sacramento State CA Zip Code 95827

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

Name of Employer Guided Wave Inc. Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2016
Transaction ID : SA11AI.20614

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Henry Bingaman

Mailing Address 325 B Monroe St

City Philadelphia State PA Zip Code 19147

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

Name of Employer Self Occupation Marketing Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 07 / 2016
Transaction ID : SA11AI.20622

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Henry Bingaman

Mailing Address 325 B Monroe St

City Philadelphia State PA Zip Code 19147

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

Name of Employer Self Occupation Marketing Consultant

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
 05 / 07 / 2016
Transaction ID : SA11AI.20623

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 9 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Henry Bingaman

Mailing Address 325 B Monroe St

City Philadelphia State PA Zip Code 19147

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

Name of Employer Self Occupation Marketing Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 07 / 2016

Transaction ID : SA11AI.20624

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 47 Sierra Springs Dr

City Crowley Lake State CA Zip Code 93546

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 ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2016

Transaction ID : SA11AI.20635

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 6517 Old Magnolia Ln

City Mint Hill State NC Zip Code 28227

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

Name of Employer none Occupation none

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2016

Transaction ID : SA11AI.20641

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 10 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. Alex Bowman		Date of Receipt MM / DD / YYYY 04 / 30 / 2016 Transaction ID : SA11AI.20645
Mailing Address 1301 Salem Cir		Amount of Each Receipt this Period 25.00
City Bowling Green	State KY	Zip Code 42101
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Psychiatric Hospital	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Alex Bowman		Date of Receipt MM / DD / YYYY 05 / 30 / 2016 Transaction ID : SA11AI.20643
Mailing Address 1301 Salem Cir		Amount of Each Receipt this Period 25.00
City Bowling Green	State KY	Zip Code 42101
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Psychiatric Hospital	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Alex Bowman		Date of Receipt MM / DD / YYYY 06 / 30 / 2016 Transaction ID : SA11AI.20644
Mailing Address 1301 Salem Cir		Amount of Each Receipt this Period 25.00
City Bowling Green	State KY	Zip Code 42101
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer Psychiatric Hospital	Occupation Case Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Adam Boyer

Mailing Address 608 Ray Drive

City Silver Spring State MD Zip Code 20910

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 12 / 2016
Transaction ID : SA11AI.20650

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Adam Boyer

Mailing Address 608 Ray Drive

City Silver Spring State MD Zip Code 20910

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2016
Transaction ID : SA11AI.20648

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Adam Boyer

Mailing Address 608 Ray Drive

City Silver Spring State MD Zip Code 20910

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2016
Transaction ID : SA11AI.20649

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 124
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Courtez Brown
 Mailing Address 1108 Morningstar Trail
 City State Zip Code
 Richardson TX 75081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mastercard Software Technical Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016
Transaction ID : SA11AI.20664
 Amount of Each Receipt this Period
 100.00
 Memo Item

Full Name (Last, First, Middle Initial)
B. Courtez Brown
 Mailing Address 1108 Morningstar Trail
 City State Zip Code
 Richardson TX 75081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mastercard Software Technical Consultant
 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
 05 / 21 / 2016
Transaction ID : SA11AI.20665
 Amount of Each Receipt this Period
 100.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. Courtez Brown
 Mailing Address 1108 Morningstar Trail
 City State Zip Code
 Richardson TX 75081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Mastercard Software Technical Consultant
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2016
Transaction ID : SA11AI.20666
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00
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 13 OF 124
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

A. Daniel Cahill
Full Name (Last, First, Middle Initial)

Mailing Address 1103 Slaydon St.

City Henderson State TX Zip Code 75654

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

Name of Employer New London United Methodist Ch Occupation Music Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 31 / 2016
Transaction ID : SA11AI.20692

Amount of Each Receipt this Period 50.00

Memo Item

B. Daniel Cahill
Full Name (Last, First, Middle Initial)

Mailing Address 1103 Slaydon St.

City Henderson State TX Zip Code 75654

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

Name of Employer New London United Methodist Ch Occupation Music Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.20693

Amount of Each Receipt this Period 50.00

Memo Item

C. Julie Canman
Full Name (Last, First, Middle Initial)

Mailing Address 200 Pinehurst Ave

City New York State NY Zip Code 10033

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

Name of Employer Columbia University Occupation Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 06 / 2016
Transaction ID : SA11AI.20703

Amount of Each Receipt this Period 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 14 OF 124
	<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)
WOLF PAC

A. Julie Canman
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Pinehurst Ave
 City New York State NY Zip Code 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Columbia University Occupation Scientist
 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
 05 / 11 / 2016
Transaction ID : SA11AI.20704
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. Julie Canman
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Pinehurst Ave
 City New York State NY Zip Code 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Columbia University Occupation Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2016
Transaction ID : SA11AI.20705
 Amount of Each Receipt this Period
 25.00
 Memo Item

C. Julie Canman
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 Pinehurst Ave
 City New York State NY Zip Code 10033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Columbia University Occupation Scientist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2016
Transaction ID : SA11AI.20706
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 124
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Alvaro Cardenas

Mailing Address 1835 Fillmore Street

City State Zip Code
Santa Clara CA 95050

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

Name of Employer Occupation
NA Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 05 / 2016
Transaction ID : SA11AI.20710

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Alvaro Cardenas

Mailing Address 1835 Fillmore Street

City State Zip Code
Santa Clara CA 95050

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

Name of Employer Occupation
NA Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 05 / 2016
Transaction ID : SA11AI.20708

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alvaro Cardenas

Mailing Address 1835 Fillmore Street

City State Zip Code
Santa Clara CA 95050

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

Name of Employer Occupation
NA Self

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 05 / 2016
Transaction ID : SA11AI.20709

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. bella cespedes		Date of Receipt MM / DD / YYYY 06 / 25 / 2016
Mailing Address 8114 sw 103 ave		Transaction ID : SA11AI.20723
City Miami	State FL	Zip Code 33173
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Savanna Cooper		Date of Receipt MM / DD / YYYY 04 / 30 / 2016
Mailing Address 1165 San Sebastian Ct		Transaction ID : SA11AI.20760
City Grover Beach	State CA	Zip Code 93433
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation N/A	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jonathan Criswell		Date of Receipt MM / DD / YYYY 04 / 14 / 2016
Mailing Address 9874 Highwater Ct		Transaction ID : SA11AI.20767
City Burke	State VA	Zip Code 22015
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer United States Marine Corps	Occupation Marine	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 17 OF 124
	<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)
WOLF PAC

A. Jonathan Criswell
 Full Name (Last, First, Middle Initial)
 Mailing Address 9874 Highwater Ct
 City State Zip Code
 Burke VA 22015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United States Marine Corps Marine
 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
 05 / 14 / 2016
Transaction ID : SA11AI.20768
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Erick Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 541 High Street
 City State Zip Code
 Medford MA 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Plexxi, Inc. Product Manager
 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
 05 / 20 / 2016
Transaction ID : SA11AI.20773
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Erick Crowell
 Full Name (Last, First, Middle Initial)
 Mailing Address 541 High Street
 City State Zip Code
 Medford MA 02155
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Plexxi, Inc. Product Manager
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2016
Transaction ID : SA11AI.20774
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 18 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. Courtney Cupples		Date of Receipt
Mailing Address 115 Ridgewood Ave		<input type="text" value="05"/> / <input type="text" value="11"/> / <input type="text" value="2016"/>
City	State	Zip Code
North Haven	CT	06473
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Alexion Pharma	Marketing Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Courtney Cupples		Date of Receipt
Mailing Address 115 Ridgewood Ave		<input type="text" value="06"/> / <input type="text" value="11"/> / <input type="text" value="2016"/>
City	State	Zip Code
North Haven	CT	06473
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Alexion Pharma	Marketing Consultant	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Blake Dearing		Date of Receipt
Mailing Address 109 white oak Ln		<input type="text" value="05"/> / <input type="text" value="16"/> / <input type="text" value="2016"/>
City	State	Zip Code
Little Rock	AR	72227
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Arkansas Children's Hospital	IT Operations	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="150.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 124
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Blake Dearing

Mailing Address 109 white oak Ln

City Little Rock State AR Zip Code 72227

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

Name of Employer Arkansas Children's Hospital Occupation IT Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2016
Transaction ID : SA11AI.20791

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Nick DeSantis

Mailing Address 424 N 70th St

City Seattle State WA Zip Code 98103

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

Name of Employer None Occupation None

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
 05 / 03 / 2016
Transaction ID : SA11AI.20801

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Nick DeSantis

Mailing Address 424 N 70th St

City Seattle State WA Zip Code 98103

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

Name of Employer None Occupation None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2016
Transaction ID : SA11AI.20802

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 20 OF 124
	<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)
WOLF PAC

A. Kaleb Dison
Full Name (Last, First, Middle Initial)
Mailing Address 1321 Madison Park Dr
City Madison State AL Zip Code 35758
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 08 / 2016
Transaction ID : SA11AI.20804
Amount of Each Receipt this Period 50.00
 Memo Item

B. Kaleb Dison
Full Name (Last, First, Middle Initial)
Mailing Address 1321 Madison Park Dr
City Madison State AL Zip Code 35758
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 08 / 2016
Transaction ID : SA11AI.20805
Amount of Each Receipt this Period 50.00
 Memo Item

C. Ben Donovan
Full Name (Last, First, Middle Initial)
Mailing Address 245 Michigan Ave PH8
City Miami Beach State FL Zip Code 33139
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2016
Transaction ID : SA11AI.20812
Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
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 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. Florian Eggenberger		Date of Receipt MM / DD / YYYY 05 / 25 / 2016 Transaction ID : SA11AI.20848
Mailing Address 279 Springridge Dr		Amount of Each Receipt this Period 25.00
City North Salt Lake	State UT	Zip Code 84054
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer self employed	Occupation IT System Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Florian Eggenberger		Date of Receipt MM / DD / YYYY 05 / 28 / 2016 Transaction ID : SA11AI.20851
Mailing Address 279 Springridge Dr		Amount of Each Receipt this Period 25.00
City North Salt Lake	State UT	Zip Code 84054
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer self employed	Occupation IT System Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Florian Eggenberger		Date of Receipt MM / DD / YYYY 06 / 28 / 2016 Transaction ID : SA11AI.20852
Mailing Address 279 Springridge Dr		Amount of Each Receipt this Period 25.00
City North Salt Lake	State UT	Zip Code 84054
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer self employed	Occupation IT System Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 22 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Peter Fallon

Mailing Address 91 E Lincoln Ave

City State Zip Code
Valley Stream NY 11580

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

Name of Employer Occupation
Park Assist Electrical Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2016
Transaction ID : SA11AI.20861

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Peter Fallon

Mailing Address 91 E Lincoln Ave

City State Zip Code
Valley Stream NY 11580

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

Name of Employer Occupation
Park Assist Electrical Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
06 / 13 / 2016
Transaction ID : SA11AI.20862

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Stephen Garcia

Mailing Address 50 Dey St
Loft 439

City State Zip Code
Jersey City NJ 07306

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

Name of Employer Occupation
BFS Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
05 / 04 / 2016
Transaction ID : SA11AI.20906

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 23 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Stephen Garcia

Mailing Address 50 Dey St
Loft 439

City Jersey City State NJ Zip Code 07306

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

Name of Employer BFS Occupation Security

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
06 / 04 / 2016
Transaction ID : SA11AI.20907

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. jaime garfield

Mailing Address 113 Campbell St

City Santa Cruz State CA Zip Code 95060

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 ▼
475.00

Date of Receipt
04 / 11 / 2016
Transaction ID : SA11AI.20909

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. jaime garfield

Mailing Address 113 Campbell St

City Santa Cruz State CA Zip Code 95060

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 ▼
500.00

Date of Receipt
04 / 20 / 2016
Transaction ID : SA11AI.20912

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. jaime garfield		Date of Receipt MM / DD / YYYY 05 / 11 / 2016 Transaction ID : SA11AI.20910
Mailing Address 113 Campbell St		Amount of Each Receipt this Period 100.00
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. jaime garfield		Date of Receipt MM / DD / YYYY 05 / 20 / 2016 Transaction ID : SA11AI.20913
Mailing Address 113 Campbell St		Amount of Each Receipt this Period 25.00
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) C. jaime garfield		Date of Receipt MM / DD / YYYY 06 / 11 / 2016 Transaction ID : SA11AI.20911
Mailing Address 113 Campbell St		Amount of Each Receipt this Period 100.00
City Santa Cruz	State CA	Zip Code 95060
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer retired	Occupation retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 25 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Raymond Giorgi

Mailing Address 113 Marion Ave

City Pittsburgh	State PA	Zip Code 15221
--------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Software Engineer
-------------------------	---------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2016
Transaction ID : SA11AI.20932

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Raymond Giorgi

Mailing Address 113 Marion Ave

City Pittsburgh	State PA	Zip Code 15221
--------------------	-------------	-------------------

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

Name of Employer N/A	Occupation Software Engineer
-------------------------	---------------------------------

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
 05 / 06 / 2016
Transaction ID : SA11AI.20933

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Carl Glover

Mailing Address 4045 Colorado St

City Long Beach	State CA	Zip Code 90814
--------------------	-------------	-------------------

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

Name of Employer Illumination Foundation	Occupation Nurse
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016
Transaction ID : SA11AI.20938

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 124
	<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)
WOLF PAC

A. Paul Goodwin
 Full Name (Last, First, Middle Initial)
 Mailing Address 24724 Sagecrest Cir
 City Newhall State CA Zip Code 91381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer United Air Lines Occupation Pilot
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **06 / 05 / 2016**
Transaction ID : SA11AI.20956
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. John Graziano
 Full Name (Last, First, Middle Initial)
 Mailing Address 1442 Queens Rd
 City Berkeley State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREE International Occupation Director of Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **04 / 23 / 2016**
Transaction ID : SA11AI.20966
 Amount of Each Receipt this Period **100.00**
 Memo Item

c. John Graziano
 Full Name (Last, First, Middle Initial)
 Mailing Address 1442 Queens Rd
 City Berkeley State CA Zip Code 94708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GREE International Occupation Director of Engineering
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 03 / 2016**
Transaction ID : SA11AI.20968
 Amount of Each Receipt this Period **25.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	175.00
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 124
	<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)
WOLF PAC

A. John Graziano
Full Name (Last, First, Middle Initial)

Mailing Address 1442 Queens Rd

City Berkeley State CA Zip Code 94708

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

Name of Employer GREE International Occupation Director of Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 06 / 03 / 2016
Transaction ID : SA11AI.20969

Amount of Each Receipt this Period 25.00

Memo Item

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

Mailing Address 16657 E 23rd St S Suite 204

City Independence State MO Zip Code 64055

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

Name of Employer ACS Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2016
Transaction ID : SA11AI.20992

Amount of Each Receipt this Period 50.00

Memo Item

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

Mailing Address 16657 E 23rd St S Suite 204

City Independence State MO Zip Code 64055

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

Name of Employer ACS Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 30 / 2016
Transaction ID : SA11AI.20993

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 28 OF 124
	<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)
WOLF PAC

A. KEN HAYES
Full Name (Last, First, Middle Initial)

Mailing Address 1223 SW Catlin Crest Dr

City Portalnd State OR Zip Code 97225

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

Name of Employer self Occupation investor-environmentalist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.21000

Amount of Each Receipt this Period 50.00

Memo Item

B. Jeremy Heesch
Full Name (Last, First, Middle Initial)

Mailing Address 3014 W Sentinel Rock Rd

City Phoenix State AZ Zip Code 85086

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

Name of Employer Vanguard Investment Group Occupation Operations Business Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 12 / 2016
Transaction ID : SA11AI.21009

Amount of Each Receipt this Period 50.00

Memo Item

C. Jeremy Heesch
Full Name (Last, First, Middle Initial)

Mailing Address 3014 W Sentinel Rock Rd

City Phoenix State AZ Zip Code 85086

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

Name of Employer Vanguard Investment Group Occupation Operations Business Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 12 / 2016
Transaction ID : SA11AI.21010

Amount of Each Receipt this Period 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 29 OF 124
	<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)
WOLF PAC

A. Cleveland Hibbert
 Full Name (Last, First, Middle Initial)
 Mailing Address 215 WEST 90TH STREET #10B
 City New York State NY Zip Code 10024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Blue Sky Studios Occupation Artist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **06 / 21 / 2016**
Transaction ID : SA11AI.21015
 Amount of Each Receipt this Period **25.00**
 Memo Item

B. Justin V Hoffman
 Full Name (Last, First, Middle Initial)
 Mailing Address 144 La Barbara Rd
 City Santa Fe State NM Zip Code 87505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Naturo Pathic Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **06 / 03 / 2016**
Transaction ID : SA11AI.21035
 Amount of Each Receipt this Period **100.00**
 Memo Item

C. Truno Holdaway
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 Eleanore
 City Fairbanks State AK Zip Code 99701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Tanana Chiefs Conference Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 12 / 2016**
Transaction ID : SA11AI.21037
 Amount of Each Receipt this Period **50.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **175.00**
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 30 OF 124
	<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)
WOLF PAC

A. Truno Holdaway
Full Name (Last, First, Middle Initial)
Mailing Address 10 Eleanore
City Fairbanks State AK Zip Code 99701
FEC ID number of contributing federal political committee. **C**
Name of Employer Tanana Chiefs Conference Occupation
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 06 / 12 / 2016
Transaction ID : SA11AI.21038
Amount of Each Receipt this Period 50.00
 Memo Item

B. Mark Holland
Full Name (Last, First, Middle Initial)
Mailing Address 20712 5th Ave S
City Des Moines State WA Zip Code 98198
FEC ID number of contributing federal political committee. **C**
Name of Employer IBEW LU 46 Occupation Electrician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 05 / 02 / 2016
Transaction ID : SA11AI.21040
Amount of Each Receipt this Period 50.00
 Memo Item

c. Mark Holland
Full Name (Last, First, Middle Initial)
Mailing Address 20712 5th Ave S
City Des Moines State WA Zip Code 98198
FEC ID number of contributing federal political committee. **C**
Name of Employer IBEW LU 46 Occupation Electrician
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 06 / 02 / 2016
Transaction ID : SA11AI.21041
Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 150.00
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 31 OF 124
	<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)
WOLF PAC

A. Brent Houghton
Full Name (Last, First, Middle Initial)

Mailing Address 14500 Las Palmas Dr #36

City Bakersfield State CA Zip Code 93306

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

Name of Employer Slixbits Inc. Occupation Software Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 21 / 2016
Transaction ID : SA11AI.21056

Amount of Each Receipt this Period 50.00

Memo Item

B. Brent Houghton
Full Name (Last, First, Middle Initial)

Mailing Address 14500 Las Palmas Dr #36

City Bakersfield State CA Zip Code 93306

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

Name of Employer Slixbits Inc. Occupation Software Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 21 / 2016
Transaction ID : SA11AI.21057

Amount of Each Receipt this Period 50.00

Memo Item

C. Robin Hudspeth
Full Name (Last, First, Middle Initial)

Mailing Address 4712 NW 22nd St

City Coconut Creek State FL Zip Code 33063

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

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 06 / 2016
Transaction ID : SA11AI.21065

Amount of Each Receipt this Period 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 32 OF 124
	<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)
WOLF PAC

A. Robin Hudspeth
Full Name (Last, First, Middle Initial)

Mailing Address 4712 NW 22nd St

City Coconut Creek State FL Zip Code 33063

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

Name of Employer Occupation
None None

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 22 / 2016
Transaction ID : SA11AI.21066

Amount of Each Receipt this Period
25.00

Memo Item

B. Boyd Huff
Full Name (Last, First, Middle Initial)

Mailing Address 1305 NW 53rd St

City Lawton State OK Zip Code 73505

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

Name of Employer Occupation
retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 29 / 2016
Transaction ID : SA11AI.21068

Amount of Each Receipt this Period
50.00

Memo Item

C. Boyd Huff
Full Name (Last, First, Middle Initial)

Mailing Address 1305 NW 53rd St

City Lawton State OK Zip Code 73505

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

Name of Employer Occupation
retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
06 / 29 / 2016
Transaction ID : SA11AI.21069

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 124
	<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)
WOLF PAC

A. Chad Irvin
Full Name (Last, First, Middle Initial)

Mailing Address 574 Button ave apartment # 162

City	State	Zip Code
Manteca	CA	95336

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

Name of Employer	Occupation
Tracey Unified School District	English Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	29	/	2016

Transaction ID : SA11AI.21077

Amount of Each Receipt this Period
25.00

Memo Item

B. Nick Ivanovic
Full Name (Last, First, Middle Initial)

Mailing Address 1906 W 41st Street

City	State	Zip Code
Los Angeles	CA	90062

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

Name of Employer	Occupation
SoCal Edison	Electrician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2016

Transaction ID : SA11AI.21080

Amount of Each Receipt this Period
50.00

Memo Item

C. Dorothy Jordan
Full Name (Last, First, Middle Initial)

Mailing Address 1745 Kendale Ave

City	State	Zip Code
Memphis	TN	38114

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

Name of Employer	Occupation
Nuvasive Inc	Customer Service Rep

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
06	/	02	/	2016

Transaction ID : SA11AI.21106

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 34 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial) A. Thomas Kleewein		Date of Receipt MM / DD / YYYY 06 / 24 / 2016 Transaction ID : SA11AI.21129
Mailing Address 6118 Churchwood Ln		Amount of Each Receipt this Period 50.00
City Greendale	State WI	Zip Code 53129
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer Trisept Technology	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) B. Alfred Kobacker		Date of Receipt MM / DD / YYYY 04 / 23 / 2016 Transaction ID : SA11AI.21141
Mailing Address 183-5 Joshuatown Rd		Amount of Each Receipt this Period 25.00
City Lyme	State CT	Zip Code 06371
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer N/A	Occupation Musician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. Alfred Kobacker		Date of Receipt MM / DD / YYYY 05 / 23 / 2016 Transaction ID : SA11AI.21139
Mailing Address 183-5 Joshuatown Rd		Amount of Each Receipt this Period 25.00
City Lyme	State CT	Zip Code 06371
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item	
Name of Employer N/A	Occupation Musician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 35 OF 124
	<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)
WOLF PAC

A. Alfred Kobacker
Full Name (Last, First, Middle Initial)
Mailing Address 183-5 Joshuatown Rd
City State Zip Code
Lyme CT 06371
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
N/A Musician
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2016
Transaction ID : SA11AI.21140
Amount of Each Receipt this Period
25.00
 Memo Item

B. Damon Kraft
Full Name (Last, First, Middle Initial)
Mailing Address 1315 POE ST
City State Zip Code
WENATCHEE WA 98801
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Max Glide LLC Computer Programmer
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2016
Transaction ID : SA11AI.21143
Amount of Each Receipt this Period
25.00
 Memo Item

C. Michael Lemme
Full Name (Last, First, Middle Initial)
Mailing Address 63 Sunnyside Ave
City State Zip Code
Mill Valley CA 94941
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Communication Design
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
05 / 28 / 2016
Transaction ID : SA11AI.21176
Amount of Each Receipt this Period
50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 124
	<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)
WOLF PAC

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

Mailing Address 63 Sunnyside Ave

City	State	Zip Code
Mill Valley	CA	94941

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

Name of Employer	Occupation
Self	Communication Design

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2016

Transaction ID : SA11AI.21177

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 10110 Highway 9 Apt 6

City	State	Zip Code
Ben Lomond	CA	95005

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

Name of Employer	Occupation
8x8, Inc.	Sales Account Manager

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
05	/	29	/	2016

Transaction ID : SA11AI.21179

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 10110 Highway 9 Apt 6

City	State	Zip Code
Ben Lomond	CA	95005

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

Name of Employer	Occupation
8x8, Inc.	Sales Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

Transaction ID : SA11AI.21180

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 124
	<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)
WOLF PAC

A. kathy lloyd
Full Name (Last, First, Middle Initial)

Mailing Address 150 Hiran Barron Rd

City pollock State LA Zip Code 71467

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

Name of Employer: Evangeline Bank and Trust
Occupation: Process Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2016
Transaction ID : SA11AI.21193

Amount of Each Receipt this Period
75.00

Memo Item

B. kathy lloyd
Full Name (Last, First, Middle Initial)

Mailing Address 150 Hiran Barron Rd

City pollock State LA Zip Code 71467

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

Name of Employer: Evangeline Bank and Trust
Occupation: Process Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
05 / 24 / 2016
Transaction ID : SA11AI.21194

Amount of Each Receipt this Period
75.00

Memo Item

C. kathy lloyd
Full Name (Last, First, Middle Initial)

Mailing Address 150 Hiran Barron Rd

City pollock State LA Zip Code 71467

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

Name of Employer: Evangeline Bank and Trust
Occupation: Process Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2016
Transaction ID : SA11AI.21195

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 38 OF 124
	<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)
WOLF PAC

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

Mailing Address Po box 363

City Bradford State VT Zip Code 05033

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

Name of Employer Worldlearning Occupation Programmer

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
 05 / 13 / 2016

Transaction ID : SA11AI.21211

Amount of Each Receipt this Period
 50.00

Memo Item

B. Susan Lornitzo
Full Name (Last, First, Middle Initial)

Mailing Address Po box 363

City Bradford State VT Zip Code 05033

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

Name of Employer Worldlearning Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2016

Transaction ID : SA11AI.21212

Amount of Each Receipt this Period
 50.00

Memo Item

C. Chris Manchester
Full Name (Last, First, Middle Initial)

Mailing Address 8201 NE 97th St

City Kansas City State MO Zip Code 64157-7607

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

Name of Employer Cerner Occupation Systems Architect

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
 05 / 28 / 2016

Transaction ID : SA11AI.21229

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 39 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Chris Manchester

Mailing Address 8201 NE 97th St

City Kansas City State MO Zip Code 64157-7607

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

Name of Employer Cerner Occupation Systems Architect

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2016
Transaction ID : SA11AI.21230

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Edward McGann

Mailing Address PO box 813863

City Hollywood State FL Zip Code 33081

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

Name of Employer South Florida Regional Council Occupation Director of Finance and Loans

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 16 / 2016
Transaction ID : SA11AI.21259

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Jana Miller

Mailing Address 2036 White Ash Way

City Tallahassee State FL Zip Code 32308

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

Name of Employer self Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 30 / 2016
Transaction ID : SA11AI.21282

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 40 OF 124
	<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)
WOLF PAC

A. Jana Miller
Full Name (Last, First, Middle Initial)

Mailing Address 2036 White Ash Way

City Tallahassee State FL Zip Code 32308

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

Name of Employer self Occupation CPA

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
 05 / 30 / 2016

Transaction ID : SA11AI.21283

Amount of Each Receipt this Period
100.00

Memo Item

B. Jana Miller
Full Name (Last, First, Middle Initial)

Mailing Address 2036 White Ash Way

City Tallahassee State FL Zip Code 32308

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

Name of Employer self Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016

Transaction ID : SA11AI.21284

Amount of Each Receipt this Period
100.00

Memo Item

C. Marina Miranda
Full Name (Last, First, Middle Initial)

Mailing Address 6949 Exeter Ct Apt 203

City Frederick State MD Zip Code 21703

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

Name of Employer Western Services Corporation Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : SA11AI.21293

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 41 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Marina Miranda

Mailing Address 6949 Exeter Ct
Apt 203

City Frederick State MD Zip Code 21703

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

Name of Employer Western Services Corporation Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
MM / DD / YYYY
06 / 17 / 2016

Transaction ID : SA11AI.21294

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Alan Mirly

Mailing Address 2621 Sonoma St

City Pocatello State ID Zip Code 83201-2302

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

Name of Employer Pocatello ENT Occupation Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

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

Transaction ID : SA11AI.21298

Amount of Each Receipt this Period
25.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Alan Mirly

Mailing Address 2621 Sonoma St

City Pocatello State ID Zip Code 83201-2302

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

Name of Employer Pocatello ENT Occupation Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2016

Transaction ID : SA11AI.21296

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Alan Mirly

Mailing Address 2621 Sonoma St

City Pocatello State ID Zip Code 83201-2302

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

Name of Employer Pocatello ENT Occupation Physician Assistant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2016
Transaction ID : SA11AI.21297

Amount of Each Receipt this Period
 25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Rovshan Mirzayev

Mailing Address 510 E 20TH St APT 7A

City New York State NY Zip Code 10009

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

Name of Employer Cauldwell Wingate Occupation Construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2016
Transaction ID : SA11AI.21299

Amount of Each Receipt this Period
 100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Rachel Moe

Mailing Address 12631 SE 68th PI

City Bellevue State WA Zip Code 98006

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

Name of Employer Port of Seattle Occupation Application Developer

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
 06 / 05 / 2016
Transaction ID : SA11AI.21302

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 43 OF 124
	<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)
WOLF PAC

A. Nicholas Newsom
Full Name (Last, First, Middle Initial)
Mailing Address 2208 Leadenhall Way
City Raleigh State NC Zip Code 27603
FEC ID number of contributing federal political committee. **C**
Name of Employer Rival Health Occupation Director of Awesomeness
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt 04 / 01 / 2016
Transaction ID : SA11AI.21342
Amount of Each Receipt this Period 100.00
 Memo Item

B. Nicholas Newsom
Full Name (Last, First, Middle Initial)
Mailing Address 2208 Leadenhall Way
City Raleigh State NC Zip Code 27603
FEC ID number of contributing federal political committee. **C**
Name of Employer Rival Health Occupation Director of Awesomeness
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt 05 / 01 / 2016
Transaction ID : SA11AI.21343
Amount of Each Receipt this Period 100.00
 Memo Item

C. Nicholas Newsom
Full Name (Last, First, Middle Initial)
Mailing Address 2208 Leadenhall Way
City Raleigh State NC Zip Code 27603
FEC ID number of contributing federal political committee. **C**
Name of Employer Rival Health Occupation Director of Awesomeness
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt 06 / 01 / 2016
Transaction ID : SA11AI.21344
Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... 300.00
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 44 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Bryan Nissen

Mailing Address 12 Sparta Court

City South Amboy State NJ Zip Code 08879

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

Name of Employer ShowdMe Occupation Application Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.21352

Amount of Each Receipt this Period
 25.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Youki Ohkami

Mailing Address 910 Saratoga St Apt 19

City Boston State MA Zip Code 02128

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

Name of Employer State Street Corporation Occupation Fund Accountant

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
 05 / 29 / 2016
Transaction ID : SA11AI.21374

Amount of Each Receipt this Period
 50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Youki Ohkami

Mailing Address 910 Saratoga St Apt 19

City Boston State MA Zip Code 02128

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

Name of Employer State Street Corporation Occupation Fund Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.21375

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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 45 OF 124
	<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)
WOLF PAC

A. Jose Padron
Full Name (Last, First, Middle Initial)

Mailing Address 3002 Heritage Creek Ter

City Houston State TX Zip Code 77008

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

Name of Employer Self Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2016

Transaction ID : SA11AI.21384

Amount of Each Receipt this Period
 100.00

Memo Item

B. Jose Padron
Full Name (Last, First, Middle Initial)

Mailing Address 3002 Heritage Creek Ter

City Houston State TX Zip Code 77008

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

Name of Employer Self Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2016

Transaction ID : SA11AI.21385

Amount of Each Receipt this Period
 100.00

Memo Item

C. Jose Padron
Full Name (Last, First, Middle Initial)

Mailing Address 3002 Heritage Creek Ter

City Houston State TX Zip Code 77008

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

Name of Employer Self Occupation Business Owner

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 / 09 / 2016

Transaction ID : SA11AI.21386

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 46 OF 124
	<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)
WOLF PAC

A. Marshall Patterson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 914

City Gold beach	State OR	Zip Code 97444
--------------------	-------------	-------------------

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

Name of Employer ColumbiaCare	Occupation Residential Associate
----------------------------------	-------------------------------------

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
05	/	24	/	2016

Transaction ID : SA11AI.21403

Amount of Each Receipt this Period
50.00

Memo Item

B. Marshall Patterson
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 914

City Gold beach	State OR	Zip Code 97444
--------------------	-------------	-------------------

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

Name of Employer ColumbiaCare	Occupation Residential Associate
----------------------------------	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2016

Transaction ID : SA11AI.21404

Amount of Each Receipt this Period
50.00

Memo Item

C. Attila Plasch
Full Name (Last, First, Middle Initial)
Mailing Address 420 Kearney St #4

City El Cerrito	State CA	Zip Code 94530
--------------------	-------------	-------------------

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

Name of Employer Charles Schwab	Occupation Project Manager
------------------------------------	-------------------------------

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
04	/	01	/	2016

Transaction ID : SA11AI.21435

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 47 OF 124
	<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)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Attila Plasch

Mailing Address 420 Kearney St #4

City	State	Zip Code
El Cerrito	CA	94530

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

Name of Employer	Occupation
Charles Schwab	Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2016
Transaction ID : SA11AI.21433

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Attila Plasch

Mailing Address 420 Kearney St #4

City	State	Zip Code
El Cerrito	CA	94530

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

Name of Employer	Occupation
Charles Schwab	Project Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2016
Transaction ID : SA11AI.21434

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 516 W Bridle Path Ln

City	State	Zip Code
Payson	AZ	85541

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

Name of Employer	Occupation
Electric Company	PWR Plant Operator

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
 05 / 15 / 2016
Transaction ID : SA11AI.21465

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 48 OF 124
	<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)
WOLF PAC

A. Mark Rice
 Full Name (Last, First, Middle Initial)
 Mailing Address 516 W Bridle Path Ln
 City Payson State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Electric Company Occupation PWR Plant Operator
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt **06 / 15 / 2016**
Transaction ID : SA11AI.21466
 Amount of Each Receipt this Period **50.00**
 Memo Item

B. Brendan Ross
 Full Name (Last, First, Middle Initial)
 Mailing Address 3312 W 64th Ave Denver, CO 80221
 City Denver State CO Zip Code 80221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Colorado University Occupation Research Tech
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **06 / 03 / 2016**
Transaction ID : SA11AI.21501
 Amount of Each Receipt this Period **25.00**
 Memo Item

C. Cody Saya
 Full Name (Last, First, Middle Initial)
 Mailing Address 1622 golden gate ave
 City Los angeles State CA Zip Code 90026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Graphic Designer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **225.00**

Date of Receipt **06 / 16 / 2016**
Transaction ID : SA11AI.21525
 Amount of Each Receipt this Period **25.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... **100.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 124
	<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)
WOLF PAC

A. Erik Sipman
Full Name (Last, First, Middle Initial)

Mailing Address 2271 Prairie View Road

City Decorah State IA Zip Code 52101-7860

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

Name of Employer Trittech Software Systems Occupation Software Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 27 / 2016
Transaction ID : SA11AI.21573

Amount of Each Receipt this Period
 100.00

Memo Item

B. Erik Sipman
Full Name (Last, First, Middle Initial)

Mailing Address 2271 Prairie View Road

City Decorah State IA Zip Code 52101-7860

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

Name of Employer Trittech Software Systems Occupation Software Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2016
Transaction ID : SA11AI.21574

Amount of Each Receipt this Period
 100.00

Memo Item

C. Matt Smith
Full Name (Last, First, Middle Initial)

Mailing Address 4006 Diane Rd

City Juneau State AK Zip Code 99801

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

Name of Employer Self Employed Occupation Consultant

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
 05 / 18 / 2016
Transaction ID : SA11AI.21581

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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 50 OF 124
	<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)
WOLF PAC

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

Mailing Address 4006 Diane Rd

City Juneau State AK Zip Code 99801

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

Name of Employer Self Employed Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 18 / 2016
Transaction ID : SA11AI.21582

Amount of Each Receipt this Period 50.00

Memo Item

B. William Spatz
Full Name (Last, First, Middle Initial)

Mailing Address 14320 Soula Dr NE

City Albuquerque State NM Zip Code 87123

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

Name of Employer Sandia National Laboratories Occupation Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 03 / 2016
Transaction ID : SA11AI.21595

Amount of Each Receipt this Period 100.00

Memo Item

C. Brian Stanish
Full Name (Last, First, Middle Initial)

Mailing Address 2012 W St Paul Ave Unit 316

City Chicago State IL Zip Code 60647

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

Name of Employer Self Occupation Designer/Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 06 / 24 / 2016
Transaction ID : SA11AI.21603

Amount of Each Receipt this Period 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 175.00

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 51 OF 124
	<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)
WOLF PAC

A. Joshua Stevens
Full Name (Last, First, Middle Initial)
Mailing Address 19001 276th Ave SE
City Issaquah State WA Zip Code 98027
FEC ID number of contributing federal political committee. **C**
Name of Employer Microsoft Occupation Software Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2016
Transaction ID : SA11AI.21611
Amount of Each Receipt this Period
50.00
 Memo Item

B. Joshua Stevens
Full Name (Last, First, Middle Initial)
Mailing Address 19001 276th Ave SE
City Issaquah State WA Zip Code 98027
FEC ID number of contributing federal political committee. **C**
Name of Employer Microsoft Occupation Software Developer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 03 / 2016
Transaction ID : SA11AI.21612
Amount of Each Receipt this Period
50.00
 Memo Item

C. attila szabo
Full Name (Last, First, Middle Initial)
Mailing Address 2750 mall dr 325
City sarasota State FL Zip Code 34231
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Driver
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2016
Transaction ID : SA11AI.21631
Amount of Each Receipt this Period
25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
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 52 OF 124
	<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)
WOLF PAC

A. attila szabo
Full Name (Last, First, Middle Initial)

Mailing Address 2750 mall dr 325

City sarasota State FL Zip Code 34231

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

Name of Employer Self Occupation Driver

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
 05 / 06 / 2016

Transaction ID : SA11AI.21629

Amount of Each Receipt this Period
25.00

Memo Item

B. attila szabo
Full Name (Last, First, Middle Initial)

Mailing Address 2750 mall dr 325

City sarasota State FL Zip Code 34231

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

Name of Employer Self Occupation Driver

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 06 / 2016

Transaction ID : SA11AI.21630

Amount of Each Receipt this Period
25.00

Memo Item

C. Dereck Tatman
Full Name (Last, First, Middle Initial)

Mailing Address 7481 Sean Taylor Lane

City San Diego State CA Zip Code 92126

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

Name of Employer Sequenom, Inc. Occupation VP of Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2016

Transaction ID : SA11AI.21636

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 53 OF 124
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Patricia Trego

Mailing Address 7035 Horner Ave

City State Zip Code
St Louis MO 63117

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

Name of Employer Occupation
retired retired

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
 05 / 14 / 2016
Transaction ID : SA11AI.21658

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 7035 Horner Ave

City State Zip Code
St Louis MO 63117

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

Name of Employer Occupation
retired retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2016
Transaction ID : SA11AI.21659

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Riley Troyer

Mailing Address 1095 Chickadee Lp

City State Zip Code
Fairbanks AK 99712

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2016
Transaction ID : SA11AI.21665

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 54 OF 124
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WOLF PAC

Full Name (Last, First, Middle Initial)
A. Marian Veres

Mailing Address 74-52 Cypress Hills St

City Queens State NY Zip Code 11385

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

Name of Employer VAME Ironworks corp Occupation Project Manager

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
 06 / 26 / 2016
Transaction ID : SA11AI.21685

Amount of Each Receipt this Period
50.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Jeff Waite

Mailing Address 4532 Oak Crest Hill Rd Se

City Iowa City State IA Zip Code 52240

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

Name of Employer Hawkeye Sewer & Drain Inc. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 01 / 2016
Transaction ID : SA11AI.21689

Amount of Each Receipt this Period
100.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Bryan Waymire

Mailing Address 14348 82nd Ln n

City loxahatchee State FL Zip Code 33470

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

Name of Employer Walgreens Occupation Retail

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
 05 / 18 / 2016
Transaction ID : SA11AI.21709

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 55 OF 124
	<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)
WOLF PAC

A. Erik Weigel
Full Name (Last, First, Middle Initial)

Mailing Address 188 Meadowood Ln

City Vadnais Heights State MN Zip Code 55127

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

Name of Employer Electrolux Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID : SA11AI.21720

Amount of Each Receipt this Period
 100.00

Memo Item

B. Erik Weigel
Full Name (Last, First, Middle Initial)

Mailing Address 188 Meadowood Ln

City Vadnais Heights State MN Zip Code 55127

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

Name of Employer Electrolux Occupation Engineer

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
 05 / 08 / 2016

Transaction ID : SA11AI.21721

Amount of Each Receipt this Period
 100.00

Memo Item

C. Erik Weigel
Full Name (Last, First, Middle Initial)

Mailing Address 188 Meadowood Ln

City Vadnais Heights State MN Zip Code 55127

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

Name of Employer Electrolux Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2016

Transaction ID : SA11AI.21722

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 56 OF 124
(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)
WOLF PAC

A. Full Name (Last, First, Middle Initial)
eric yao

Mailing Address 17301 midsummer Ln

City State Zip Code
Castro Valley CA 94546

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

Name of Employer Occupation
UC Berkeley sw engr

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SA11AI.21765

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	9675.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Administrative Business Services

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code
District Heights MD 20747

Purpose of Disbursement
Accounting Services

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
04 / 08 / 2016

Transaction ID : **SB21B.20277**

Amount of Each Disbursement this Period

1090.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Administrative Business Services

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code
District Heights MD 20747

Purpose of Disbursement
Accounting Services

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
05 / 09 / 2016

Transaction ID : **SB21B.20328**

Amount of Each Disbursement this Period

1370.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Administrative Business Services

Mailing Address 5125 Stoney Meadows Drive

City State Zip Code
District Heights MD 20747

Purpose of Disbursement
Accounting Services

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
06 / 16 / 2016

Transaction ID : **SB21B.20431**

Amount of Each Disbursement this Period

680.00

Memo Item

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

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

3140.00

**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)
WOLF PAC

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 08 / 2016

Transaction ID : **SB21B.20465**

Amount of Each Disbursement this Period: 69.10

Memo Item

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement Payroll Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 22 / 2016

Transaction ID : **SB21B.20467**

Amount of Each Disbursement this Period: 18.00

Memo Item

C. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 28 / 2016

Transaction ID : **SB21B.20468**

Amount of Each Disbursement this Period: 4690.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4777.58

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : SB21B.20475

Amount of Each Disbursement this Period

69.10

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2016

Transaction ID : SB21B.20476

Amount of Each Disbursement this Period

18.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB21B.20477

Amount of Each Disbursement this Period

4588.06

Memo Item

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

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

4675.16

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.20483

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.20484

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 5800 Windward Parkway

City Alpharetta State GA Zip Code 30005

Purpose of Disbursement
Payroll Services

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.20490

Amount of Each Disbursement this Period

Memo Item

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

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Alamo Rent a Car

Mailing Address 1 Airport Rd

City Manchester State NH Zip Code 03103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20422**

Amount of Each Disbursement this Period

199.16

Memo Item

Full Name (Last, First, Middle Initial)

B. Alamo Rent a Car

Mailing Address 1 Airport Rd

City Manchester State NH Zip Code 03103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : **SB21B.20456**

Amount of Each Disbursement this Period

26.75

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : **SB21B.20270**

Amount of Each Disbursement this Period

203.10

Memo Item

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

429.01

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : SB21B.20354

Amount of Each Disbursement this Period

131.60

Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

Transaction ID : SB21B.20397

Amount of Each Disbursement this Period

176.60

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City DFW Airport State TX Zip Code 75261

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2016

Transaction ID : SB21B.20444

Amount of Each Disbursement this Period

237.60

Memo Item

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

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

545.80

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 60 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 18 / 2016

Transaction ID : **SB21B.20307**

Amount of Each Disbursement this Period: 263.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 60 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 17 / 2016

Transaction ID : **SB21B.20435**

Amount of Each Disbursement this Period: 143.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 04 / 2016

Transaction ID : **SB21B.20272**

Amount of Each Disbursement this Period: 695.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1101.28

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

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
04 / 08 / 2016

Transaction ID : SB21B.20276

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

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
04 / 11 / 2016

Transaction ID : SB21B.20291

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

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
04 / 11 / 2016

Transaction ID : SB21B.20292

Amount of Each Disbursement this Period

50.00

Memo Item

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

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

85.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2016

Transaction ID : **SB21B.20466**

Amount of Each Disbursement this Period

261.40

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 18 / 2016

Transaction ID : **SB21B.20310**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2016

Transaction ID : **SB21B.20313**

Amount of Each Disbursement this Period

25.00

Memo Item

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

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

296.40

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : SB21B.20318

Amount of Each Disbursement this Period

12.55

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : SB21B.20319

Amount of Each Disbursement this Period

20.28

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : SB21B.20320

Amount of Each Disbursement this Period

43.66

Memo Item

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

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

76.49

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : **SB21B.20321**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : **SB21B.20322**

Amount of Each Disbursement this Period

788.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Transaction ID : **SB21B.20324**

Amount of Each Disbursement this Period

21.29

Memo Item

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

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

860.23

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Transaction ID : SB21B.20474

Amount of Each Disbursement this Period

255.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 05 / 2016

Transaction ID : SB21B.20325

Amount of Each Disbursement this Period

30.41

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2016

Transaction ID : SB21B.20326

Amount of Each Disbursement this Period

18.54

Memo Item

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

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

303.95

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2016

Transaction ID : SB21B.20327

Amount of Each Disbursement this Period

19.28

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : SB21B.20330

Amount of Each Disbursement this Period

13.72

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : SB21B.20331

Amount of Each Disbursement this Period

16.79

Memo Item

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

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

49.79

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : **SB21B.20332**

Amount of Each Disbursement this Period

17.82

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : **SB21B.20333**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : **SB21B.20334**

Amount of Each Disbursement this Period

10.00

Memo Item

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

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

37.82

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 11 / 2016

Transaction ID : **SB21B.20335**

Amount of Each Disbursement this Period

11.98

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

Transaction ID : **SB21B.20336**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

Transaction ID : **SB21B.20337**

Amount of Each Disbursement this Period

10.89

Memo Item

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

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

32.87

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB21B.20339

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2016

Transaction ID : SB21B.20340

Amount of Each Disbursement this Period

15.04

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : SB21B.20342

Amount of Each Disbursement this Period

11.46

Memo Item

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

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

36.50

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2016

Transaction ID : SB21B.20343

Amount of Each Disbursement this Period

14.79

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2016

Transaction ID : SB21B.20344

Amount of Each Disbursement this Period

16.63

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2016

Transaction ID : SB21B.20345

Amount of Each Disbursement this Period

17.30

Memo Item

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

48.72

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2016

Transaction ID : SB21B.20346

Amount of Each Disbursement this Period

19.16

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : SB21B.20347

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2016

Transaction ID : SB21B.20348

Amount of Each Disbursement this Period

19.14

Memo Item

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

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

48.30

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2016

Transaction ID : SB21B.20353

Amount of Each Disbursement this Period

12.16

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : SB21B.20355

Amount of Each Disbursement this Period

11.70

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2016

Transaction ID : SB21B.20357

Amount of Each Disbursement this Period

13.03

Memo Item

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

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

36.89

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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2016

Transaction ID : **SB21B.20358**

Amount of Each Disbursement this Period: 15.04

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2016

Transaction ID : **SB21B.20359**

Amount of Each Disbursement this Period: 21.43

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 24 / 2016

Transaction ID : **SB21B.20360**

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 61.47

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2016

Transaction ID : **SB21B.20361**

Amount of Each Disbursement this Period

15.95

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2016

Transaction ID : **SB21B.20362**

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2016

Transaction ID : **SB21B.20363**

Amount of Each Disbursement this Period

12.86

Memo Item

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

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

53.81

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2016

Transaction ID : SB21B.20364

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

Transaction ID : SB21B.20367

Amount of Each Disbursement this Period

11.71

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20369

Amount of Each Disbursement this Period

19.05

Memo Item

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

80.76

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SB21B.20375

Amount of Each Disbursement this Period

10.52

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SB21B.20376

Amount of Each Disbursement this Period

13.55

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SB21B.20377

Amount of Each Disbursement this Period

17.99

Memo Item

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

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

42.06

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SB21B.20378

Amount of Each Disbursement this Period

20.47

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2016

Transaction ID : SB21B.20379

Amount of Each Disbursement this Period

790.18

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : SB21B.20381

Amount of Each Disbursement this Period

13.89

Memo Item

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

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

824.54

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : SB21B.20382

Amount of Each Disbursement this Period

125.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : SB21B.20383

Amount of Each Disbursement this Period

16.95

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 03 / 2016

Transaction ID : SB21B.20482

Amount of Each Disbursement this Period

251.85

Memo Item

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

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

393.80

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2016

Transaction ID : SB21B.20392

Amount of Each Disbursement this Period

22.44

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : SB21B.20394

Amount of Each Disbursement this Period

18.88

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : SB21B.20395

Amount of Each Disbursement this Period

18.98

Memo Item

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

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

60.30

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2016

Transaction ID : SB21B.20396

Amount of Each Disbursement this Period

26.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

Transaction ID : SB21B.20399

Amount of Each Disbursement this Period

12.30

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : SB21B.20400

Amount of Each Disbursement this Period

13.28

Memo Item

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

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

52.33

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : SB21B.20408

Amount of Each Disbursement this Period

17.13

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2016

Transaction ID : SB21B.20413

Amount of Each Disbursement this Period

11.63

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2016

Transaction ID : SB21B.20415

Amount of Each Disbursement this Period

11.18

Memo Item

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

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

39.94

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2016

Transaction ID : **SB21B.20416**

Amount of Each Disbursement this Period: 13.76

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 14 / 2016

Transaction ID : **SB21B.20417**

Amount of Each Disbursement this Period: 17.11

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 15 / 2016

Transaction ID : **SB21B.20421**

Amount of Each Disbursement this Period: 17.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 48.82

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20430**

Amount of Each Disbursement this Period

12.69

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 17 / 2016

Transaction ID : **SB21B.20437**

Amount of Each Disbursement this Period

16.87

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2016

Transaction ID : **SB21B.20446**

Amount of Each Disbursement this Period

16.14

Memo Item

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

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

45.70

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2016

Transaction ID : **SB21B.20447**

Amount of Each Disbursement this Period

10.39

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2016

Transaction ID : **SB21B.20448**

Amount of Each Disbursement this Period

10.57

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 21 / 2016

Transaction ID : **SB21B.20449**

Amount of Each Disbursement this Period

18.50

Memo Item

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

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

39.46

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2016

Transaction ID : SB21B.20450

Amount of Each Disbursement this Period

20.82

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 23 / 2016

Transaction ID : SB21B.20451

Amount of Each Disbursement this Period

24.77

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 24 / 2016

Transaction ID : SB21B.20454

Amount of Each Disbursement this Period

19.86

Memo Item

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

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

65.45

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : **SB21B.20455**

Amount of Each Disbursement this Period

19.27

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2016

Transaction ID : **SB21B.20460**

Amount of Each Disbursement this Period

11.01

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2016

Transaction ID : **SB21B.20461**

Amount of Each Disbursement this Period

14.86

Memo Item

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

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

45.14

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2016

Transaction ID : SB21B.20462

Amount of Each Disbursement this Period

17.96

Memo Item

Full Name (Last, First, Middle Initial)

B. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2016

Transaction ID : SB21B.20463

Amount of Each Disbursement this Period

16.47

Memo Item

Full Name (Last, First, Middle Initial)

C. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : SB21B.20464

Amount of Each Disbursement this Period

14.94

Memo Item

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

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

49.37

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Authorize.net

Mailing Address P.O. Box 8999

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2016

Transaction ID : SB21B.20496

Amount of Each Disbursement this Period
1481.72

Memo Item

Full Name (Last, First, Middle Initial)

B. Ryan Clayton

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.20470

Amount of Each Disbursement this Period
3885.25

Memo Item

Full Name (Last, First, Middle Initial)

C. Ryan Clayton

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20478

Amount of Each Disbursement this Period
3885.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9252.22

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Ryan Clayton

Mailing Address 8710 Cameron Street

City Silver Spring State MD Zip Code 20910

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.20485

Amount of Each Disbursement this Period

3885.25

Memo Item

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address P. O. Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2016

Transaction ID : SB21B.20323

Amount of Each Disbursement this Period

166.60

Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address P. O. Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2016

Transaction ID : SB21B.20349

Amount of Each Disbursement this Period

195.60

Memo Item

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

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

4247.45

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Democracy Engine

Mailing Address 2125 14TH STREET NW #101W

City Washington State DC Zip Code 20009

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : **SB21B.20494**

Amount of Each Disbursement this Period

217.77

Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2016

Transaction ID : **SB21B.20278**

Amount of Each Disbursement this Period

178.08

Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2016

Transaction ID : **SB21B.20350**

Amount of Each Disbursement this Period

117.48

Memo Item

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

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

513.33

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2016

Transaction ID : SB21B.20388

Amount of Each Disbursement this Period

101.54

Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2016

Transaction ID : SB21B.20411

Amount of Each Disbursement this Period

107.01

Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2016

Transaction ID : SB21B.20412

Amount of Each Disbursement this Period

124.06

Memo Item

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

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

332.61

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 20 / 2016

Transaction ID : **SB21B.20443**

Amount of Each Disbursement this Period: 98.87

Memo Item

Full Name (Last, First, Middle Initial)

B. Blair FitzGibbon

Mailing Address 13836 Bridlewood Drive

City Gainesville State VA Zip Code 20155

Purpose of Disbursement Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 23 / 2016

Transaction ID : **SB21B.20452**

Amount of Each Disbursement this Period: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Google

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement Web Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 11 / 2016

Transaction ID : **SB21B.20283**

Amount of Each Disbursement this Period: 114.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1212.87

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Google

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Web Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2016

Transaction ID : **SB21B.20341**

Amount of Each Disbursement this Period

76.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Google

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Web Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2016

Transaction ID : **SB21B.20380**

Amount of Each Disbursement this Period

95.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Alison Hartson

Mailing Address 10419 Slater Ave
202

City Fountain Valley State CA Zip Code 92708

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : **SB21B.20471**

Amount of Each Disbursement this Period

2795.00

Memo Item

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

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

2966.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Alison Hartson

Mailing Address 10419 Slater Ave
202

City Fountain Valley State CA Zip Code 92708

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
05 / 31 / 2016

Transaction ID : **SB21B.20479**

Amount of Each Disbursement this Period

2795.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Alison Hartson

Mailing Address 10419 Slater Ave
202

City Fountain Valley State CA Zip Code 92708

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
06 / 27 / 2016

Transaction ID : **SB21B.20486**

Amount of Each Disbursement this Period

2795.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

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
04 / 01 / 2016

Transaction ID : **SB21B.20266**

Amount of Each Disbursement this Period

74.08

Memo Item

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

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

5664.08

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

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
04	/	11	/	2016

Transaction ID : SB21B.20279

Amount of Each Disbursement this Period

82.16

Memo Item

Full Name (Last, First, Middle Initial)

B. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

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
04	/	15	/	2016

Transaction ID : SB21B.20303

Amount of Each Disbursement this Period

43.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

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
06	/	01	/	2016

Transaction ID : SB21B.20374

Amount of Each Disbursement this Period

102.58

Memo Item

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

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

227.91

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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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB21B.20406**

Amount of Each Disbursement this Period

330.81

Memo Item

Full Name (Last, First, Middle Initial)

B. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB21B.20407**

Amount of Each Disbursement this Period

69.29

Memo Item

Full Name (Last, First, Middle Initial)

C. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2016

Transaction ID : **SB21B.20419**

Amount of Each Disbursement this Period

2211.00

Memo Item

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

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

2611.10

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Hotwire

Mailing Address 655 Montgomery Street

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2016

Transaction ID : **SB21B.20420**

Amount of Each Disbursement this Period

67.29

Memo Item

Full Name (Last, First, Middle Initial)

B. Todd Jagger

Mailing Address PO Box 2089
2089

City Fort Davis State TX Zip Code 79734

Purpose of Disbursement
Website

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2016

Transaction ID : **SB21B.20366**

Amount of Each Disbursement this Period

368.85

Memo Item

Full Name (Last, First, Middle Initial)

C. Todd Jagger

Mailing Address PO Box 2089
2089

City Fort Davis State TX Zip Code 79734

Purpose of Disbursement
Travel Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20433**

Amount of Each Disbursement this Period

221.00

Memo Item

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

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

657.14

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Richard Lake

Mailing Address 1408 Circle Dr.

City State Zip Code
Mt. Prospect IL 60056

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
04	/	29	/	2016

Transaction ID : SB21B.20472

Amount of Each Disbursement this Period

2207.02

Memo Item

Full Name (Last, First, Middle Initial)

B. Richard Lake

Mailing Address 1408 Circle Dr.

City State Zip Code
Mt. Prospect IL 60056

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
05	/	31	/	2016

Transaction ID : SB21B.20480

Amount of Each Disbursement this Period

2523.34

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard Lake

Mailing Address 1408 Circle Dr.

City State Zip Code
Mt. Prospect IL 60056

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
06	/	27	/	2016

Transaction ID : SB21B.20487

Amount of Each Disbursement this Period

2207.02

Memo Item

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

6937.38

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

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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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Michael Monetta

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : **SB21B.20473**

Amount of Each Disbursement this Period

3068.25

Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Monetta

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : **SB21B.20481**

Amount of Each Disbursement this Period

3068.25

Memo Item

Full Name (Last, First, Middle Initial)

C. Michael Monetta

Mailing Address 108 Leslie Drive

City Portsmouth State NH Zip Code 03801

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : **SB21B.20488**

Amount of Each Disbursement this Period

3068.25

Memo Item

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

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

9204.75

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Nationbuilder

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement
Website

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2016

Transaction ID : SB21B.20398

Amount of Each Disbursement this Period

1608.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Orbitz

Mailing Address 500 W Madison

City Chicago State IL Zip Code 60661

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2016

Transaction ID : SB21B.20418

Amount of Each Disbursement this Period

4.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2016

Transaction ID : SB21B.20495

Amount of Each Disbursement this Period

1197.07

Memo Item

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

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

2809.07

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Sandler, Reiff, Lamb, Rosenstein & Birkenstock, PC

Mailing Address 1025 Vermont Ave., NW
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20432**

Amount of Each Disbursement this Period

1200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Shell Oil

Mailing Address 135 N. Access Road

City South San Francisco State CA Zip Code 94123

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2016

Transaction ID : **SB21B.20387**

Amount of Each Disbursement this Period

12.90

Memo Item

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address 2702 Love Field Drive

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20429**

Amount of Each Disbursement this Period

607.96

Memo Item

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

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

1820.86

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. State Fund

Mailing Address PO Box 8192

City Pleasanton State CA Zip Code 94588

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.20458

Amount of Each Disbursement this Period

358.50

Memo Item

Full Name (Last, First, Middle Initial)

B. State Fund

Mailing Address PO Box 8192

City Pleasanton State CA Zip Code 94588

Purpose of Disbursement
Payroll Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.20459

Amount of Each Disbursement this Period

43.07

Memo Item

Full Name (Last, First, Middle Initial)

C. Samuel Sullivan-Friedman

Mailing Address 3103 Fairfield Avenue #10G

City Bronx State NY Zip Code 10463

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 27 / 2016

Transaction ID : SB21B.20489

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

1401.57

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Jay Swearingen

Mailing Address 2914 Gentry Park

City Kansas City State MO Zip Code 64116

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.20491

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Liberti Group

Mailing Address 400 Renaissance Center

City Detroit State MI Zip Code 48243

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SB21B.20265

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Liberti Group

Mailing Address 400 Renaissance Center

City Detroit State MI Zip Code 48243

Purpose of Disbursement
Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SB21B.20312

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

3500.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. The Liberti Group

Mailing Address 400 Renaissance Center

City State Zip Code
Detroit MI 48243

Purpose of Disbursement
Strategic Consulting

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
05 / 27 / 2016

Transaction ID : **SB21B.20368**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Liberti Group

Mailing Address 400 Renaissance Center

City State Zip Code
Detroit MI 48243

Purpose of Disbursement
Strategic Consulting

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
06 / 27 / 2016

Transaction ID : **SB21B.20457**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City State Zip Code
WEST HOLLYWOOD CA 90069

Purpose of Disbursement
Bank Charges

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
04 / 11 / 2016

Transaction ID : **SB21B.20282**

Amount of Each Disbursement this Period

12.95

Memo Item

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

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

2012.95

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2016

Transaction ID : **SB21B.20297**

Amount of Each Disbursement this Period

62.00

Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316**

Amount of Each Disbursement this Period

5630.18

Memo Item

Full Name (Last, First, Middle Initial)

C. AirBNB

Mailing Address 888 Brannan Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316.0**

Amount of Each Disbursement this Period

686.00

Memo Item

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

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

5692.18

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Alaska Air

Mailing Address PO Box 68900

City State Zip Code
Seattle WA 98168

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.1

Amount of Each Disbursement this Period

201.60

Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City State Zip Code
DFW Airport TX 75261

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.2

Amount of Each Disbursement this Period

188.10

Memo Item

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address P. O. Box 20706

City State Zip Code
Atlanta GA 30320

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.4

Amount of Each Disbursement this Period

739.20

Memo Item

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

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

0.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Dollar Rent a Car

Mailing Address 9105 NE Airport Way

City Portland State OR Zip Code 97220

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316.5**

Amount of Each Disbursement this Period

149.85

Memo Item

Full Name (Last, First, Middle Initial)

B. Enterprise Rent a Car

Mailing Address 445 SW Pine Street

City Portland State OR Zip Code 97204

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316.6**

Amount of Each Disbursement this Period

74.89

Memo Item

Full Name (Last, First, Middle Initial)

C. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316.8**

Amount of Each Disbursement this Period

315.97

Memo Item

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

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

0.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Motel 6

Mailing Address 6011 S Street Road

City Springfield State IL Zip Code 62712

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

Transaction ID : SB21B.20316.10

Amount of Each Disbursement this Period

186.27

Memo Item

Full Name (Last, First, Middle Initial)

B. Nationbuilder

Mailing Address 11693 San Vicente Blvd., #560

City Los Angeles State CA Zip Code 90049

Purpose of Disbursement Website

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
04	/	30	/	2016

Transaction ID : SB21B.20316.11

Amount of Each Disbursement this Period

1508.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Orbitz

Mailing Address 500 W Madison

City Chicago State IL Zip Code 60661

Purpose of Disbursement Travel

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
04	/	30	/	2016

Transaction ID : SB21B.20316.12

Amount of Each Disbursement this Period

441.85

Memo Item

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

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

0.00

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**SCHEDULE B (FEC Form 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Priceline

Mailing Address 800 Connecticut Ave

City Norwalk State CT Zip Code 06854

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.13

Amount of Each Disbursement this Period

115.92

Memo Item

Full Name (Last, First, Middle Initial)

B. Shell Oil

Mailing Address 135 N. Access Road

City South San Francisco State CA Zip Code 94123

Purpose of Disbursement
Gas

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.14

Amount of Each Disbursement this Period

78.15

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : SB21B.20316.17

Amount of Each Disbursement this Period

12.40

Memo Item

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

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

0.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2016

Transaction ID : **SB21B.20316.18**

Amount of Each Disbursement this Period

43.95

Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2016

Transaction ID : **SB21B.20329**

Amount of Each Disbursement this Period

12.95

Memo Item

Full Name (Last, First, Middle Initial)

C. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement
Bank Charges

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 13 / 2016

Transaction ID : **SB21B.20338**

Amount of Each Disbursement this Period

31.00

Memo Item

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

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

43.95

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement
Credit Card Payment

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370

Amount of Each Disbursement this Period

1506.24

Memo Item

Full Name (Last, First, Middle Initial)

B. Fedex Office

Mailing Address 1155 Harrison Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Printing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370.1

Amount of Each Disbursement this Period

422.38

Memo Item

Full Name (Last, First, Middle Initial)

C. Motel 6

Mailing Address 6011 S Street Road

City Springfield State IL Zip Code 62712

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370.3

Amount of Each Disbursement this Period

50.00

Memo Item

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

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

1506.24

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Orbitz

Mailing Address 500 W Madison

City Chicago State IL Zip Code 60661

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370.4

Amount of Each Disbursement this Period

310.81

Memo Item

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address 2702 Love Field Drive

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370.5

Amount of Each Disbursement this Period

93.98

Memo Item

Full Name (Last, First, Middle Initial)

C. Spirit Airlines

Mailing Address 2800 Executive Way

City Miramar State FL Zip Code 33025

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.20370.6

Amount of Each Disbursement this Period

98.09

Memo Item

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

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

0.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 85 N. Main Street

City Branford State CT Zip Code 06405

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 31 / 2016

Transaction ID : **SB21B.20370.7**

Amount of Each Disbursement this Period: 259.96

Memo Item

Full Name (Last, First, Middle Initial)

B. U.S. BANK

Mailing Address 8901 SANTA MONICA BLVD.

City WEST HOLLYWOOD State CA Zip Code 90069

Purpose of Disbursement Bank Charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2016

Transaction ID : **SB21B.20401**

Amount of Each Disbursement this Period: 12.95

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2016

Transaction ID : **SB21B.20290**

Amount of Each Disbursement this Period: 11.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 24.84

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2016

Transaction ID : SB21B.20296

Amount of Each Disbursement this Period

14.52

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2016

Transaction ID : SB21B.20299

Amount of Each Disbursement this Period

15.09

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2016

Transaction ID : SB21B.20306

Amount of Each Disbursement this Period

26.22

Memo Item

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

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

55.83

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2016

Transaction ID : **SB21B.20393**

Amount of Each Disbursement this Period: 10.84

Memo Item

Full Name (Last, First, Middle Initial)

B. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 16 / 2016

Transaction ID : **SB21B.20424**

Amount of Each Disbursement this Period: 5.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 17 / 2016

Transaction ID : **SB21B.20436**

Amount of Each Disbursement this Period: 5.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 22.34

TOTAL 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. Uber Technologies

Mailing Address 1455 Market Street

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 20 / 2016

Transaction ID : **SB21B.20440**

Amount of Each Disbursement this Period

5.75

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Registrar

Mailing Address 8939 S. Sepulveda Blvd

City Westchester State CA Zip Code 90045

Purpose of Disbursement
Registration Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB21B.20498**

Amount of Each Disbursement this Period

250.00

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2016

Transaction ID : **SB21B.20298**

Amount of Each Disbursement this Period

261.10

Memo Item

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

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

516.85

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2016

Transaction ID : **SB21B.20391**

Amount of Each Disbursement this Period

84.10

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB21B.20404**

Amount of Each Disbursement this Period

106.10

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2016

Transaction ID : **SB21B.20405**

Amount of Each Disbursement this Period

106.10

Memo Item

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

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

296.30

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20425**

Amount of Each Disbursement this Period

891.20

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20426**

Amount of Each Disbursement this Period

618.20

Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20427**

Amount of Each Disbursement this Period

196.60

Memo Item

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

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

1706.00

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address PO Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2016

Transaction ID : **SB21B.20428**

Amount of Each Disbursement this Period

310.60

Memo Item

Full Name (Last, First, Middle Initial)

B. United Healthcare

Mailing Address 4 Taft Court

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : **SB21B.20274**

Amount of Each Disbursement this Period

2438.01

Memo Item

Full Name (Last, First, Middle Initial)

C. United Healthcare

Mailing Address 4 Taft Court

City Rockville State MD Zip Code 20850

Purpose of Disbursement
Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2016

Transaction ID : **SB21B.20317**

Amount of Each Disbursement this Period

2438.01

Memo Item

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

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

5186.62

**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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. United Healthcare

Mailing Address 4 Taft Court

City Rockville State MD Zip Code 20850

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2016

Transaction ID : SB21B.20356

Amount of Each Disbursement this Period

2438.01

Memo Item

Full Name (Last, First, Middle Initial)

B. United Healthcare

Mailing Address 4 Taft Court

City Rockville State MD Zip Code 20850

Purpose of Disbursement Insurance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2016

Transaction ID : SB21B.20402

Amount of Each Disbursement this Period

2438.01

Memo Item

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

4876.02

98422.18

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 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)
WOLF PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN HATCHET PAC

Mailing Address 208 W BALSAM RD

City STERLING State VA Zip Code 20164

Purpose of Disbursement
Contribution

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
04	/	28	/	2016

Transaction ID : SB23.20314

Amount of Each Disbursement this Period

5000.00

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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Memo Item

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

5000.00

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

5000.00
