

# 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.   
Senate Leadership Fund

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  /  /  through  /  /

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 Caleb Crosby

Signature of Treasurer Caleb Crosby [Electronically Filed] Date  /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Senate Leadership Fund**

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"/>		11250383.87
(b) Cash on Hand at Beginning of Reporting Period.....	18568141.28	
(c) Total Receipts (from Line 19) .....	28175100.00	39332925.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	46743241.28	50583308.87
7. Total Disbursements (from Line 31).....	6481569.25	10321636.84
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	40261672.03	40261672.03
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**Senate Leadership Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	26800000.00	37936000.00
(ii) Unitemized .....	100.00	250.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	26800100.00	37936250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1375000.00	1395000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	28175100.00	39331250.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	1675.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	28175100.00	39332925.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	28175100.00	39332925.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	757300.53	2352792.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	757300.53	2352792.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4800000.00	4800000.00
24. Independent Expenditures (use Schedule E) .....	924268.72	3168844.33
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6481569.25	10321636.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6481569.25	10321636.84

**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) .....	28175100.00	39331250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	28175100.00	39331250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	757300.53	2352792.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1675.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	757300.53	2351117.51

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

Form/Schedule: F3XN  
Transaction ID :

1. Unless otherwise noted, none of the expenditures reported are allocable to a candidate. 2. For all Ultimate Vendor Payee disbursements, any transaction below the itemization threshold in the aggregate will not appear as a memo entry

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 39  
(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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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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. ZUFFA LLC**

Mailing Address **PO BOX 26959**

City **LAS VEGAS** State **NV** Zip Code **89126-0959**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 05 / 2016**

**Transaction ID : SA11A.266**

Amount of Each Receipt this Period  
**50000.00**

Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**B. MR. KENNETH C. GRIFFIN**

Mailing Address **131 S DEARBORN ST  
SUITE 3200**

City **CHICAGO** State **IL** Zip Code **60603-5585**

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

Name of Employer Occupation  
**CITADEL INVESTMENT GROUP**  
**CEO**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2100000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2016**

**Transaction ID : SA11A.267**

Amount of Each Receipt this Period  
**2000000.00**

Memo Item  
**CONTRIBUTION**

Full Name (Last, First, Middle Initial)  
**C. MR. WILLIAM E. OBERNDORF**

Mailing Address **101 WALNUT STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94118-2031**

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

Name of Employer Occupation  
**OBERNDORF ENTERPRISES, LLC**  
**EXECUTIVE**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**08 / 09 / 2016**

**Transaction ID : SA11A.269**

Amount of Each Receipt this Period  
**100000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2150000.00**

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

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

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

FOR LINE NUMBER: PAGE 8 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. CLEARPATH ACTION, INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1355 GREENWOOD CLIFFS  
 SUITE 301  
 City CHARLOTTE State NC Zip Code 28204-2981  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 09 / 2016  
**Transaction ID : SA11A.268**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item  
**CONTRIBUTION**

**B. PETRODOME ENERGY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4203 YOAKUM BOULEVARD  
 SUITE 200  
 City HOUSTON State TX Zip Code 77006-5455  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 11 / 2016  
**Transaction ID : SA11A.270**  
 Amount of Each Receipt this Period  
 1000000.00  
 Memo Item  
**CONTRIBUTION**

**C. MR. STEPHEN I. CHAZEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 1229  
 City BELLAIRE State TX Zip Code 77402-1229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OCCIDENTAL PETROLEUM CORPORATION PRESIDENT & CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 75000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2016  
**Transaction ID : SA11A.272**  
 Amount of Each Receipt this Period  
 75000.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1175000.00  
**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 39
	<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)  
**Senate Leadership Fund**

**A. MR. DAVID G. HERRO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 159 E WALTON PLACE  
 31A  
 City CHICAGO State IL Zip Code 60611-1971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HARRIS ASSOCIATES Occupation INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11A.274**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item  
**CONTRIBUTION**

**B. MR. PATRICK G. RYAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1011 GREEN BAY ROAD  
 PMB 309  
 City WINNETKA State IL Zip Code 60093-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RYAN SPECIALTY GROUP Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 15 / 2016  
**Transaction ID : SA11A.273**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
**CONTRIBUTION**

**C. MR. PAUL ELLIOTT SINGER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 40 W 57TH ST FL 30  
 City NEW YORK State NY Zip Code 10019-4001  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ELLIOTT MANAGEMENT GROUP Occupation FOUNDER & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 08 / 17 / 2016  
**Transaction ID : SA11A.282**  
 Amount of Each Receipt this Period 1000000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 10 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. MR. JAMES S. DAVIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 100 GUEST STREET  
 City BOSTON State MA Zip Code 02135-2028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NEW BALANCE ATHLETIC SHOE, INC. Occupation CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 18 / 2016  
**Transaction ID : SA11A.276**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item  
 CONTRIBUTION

**B. HILLWOOD DEVELOPMENT COMPANY LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3090 OLIVE STREET SUITE 200  
 City DALLAS State TX Zip Code 75219-7640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 18 / 2016  
**Transaction ID : SA11A.275**  
 Amount of Each Receipt this Period 250000.00  
 Memo Item  
 CONTRIBUTION

**C. MR. JEFFREY SILVERMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1445 16TH STREET  
 City MIAMI BEACH State FL Zip Code 33139-2147  
 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 ▼ 50000.00

Date of Receipt 08 / 20 / 2016  
**Transaction ID : SA11A.278**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 550000.00  
**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 11 OF 39  
(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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. MR. ANDREW SABIN**

Mailing Address 300 PANTIGO RD  
SUITE 102

City EAST HAMPTON State NY Zip Code 11937-2630

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

Name of Employer SABIN METAL Occupation EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
08 / 23 / 2016

**Transaction ID : SA11A.280**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 4609 WEST 65TH SOUTH

City IDAHO FALLS State ID Zip Code 83402-5742

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
180000.00

Date of Receipt  
08 / 25 / 2016

**Transaction ID : SA11A.284**

Amount of Each Receipt this Period  
180000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 2888 N 55TH W

City IDAHO FALLS State ID Zip Code 83402-5384

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220000.00

Date of Receipt  
08 / 25 / 2016

**Transaction ID : SA11A.283**

Amount of Each Receipt this Period  
220000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425000.00

**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 12 OF 39
<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)  
**Senate Leadership Fund**

**A. MR. SHELDON G. ADELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 S RAMPART BLVD  
 SUITE 440  
 City LAS VEGAS State NV Zip Code 89145-5749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer LAS VEGAS SANDS CORPORATION Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000000.00

Date of Receipt 08 / 26 / 2016  
**Transaction ID : SA11A.285**  
 Amount of Each Receipt this Period 10000000.00  
 Memo Item  
 CONTRIBUTION

**B. DR. MIRIAM ADELSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 410 S RAMPART BLVD  
 SUITE 440  
 City LAS VEGAS State NV Zip Code 89145-5749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ADELSON DRUG CLINIC Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000000.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11A.300**  
 Amount of Each Receipt this Period 10000000.00  
 Memo Item  
 CONTRIBUTION

**C. MR. BRADLEY M. BLOOM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 ALBION ROAD  
 City WELLESLEY State MA Zip Code 02481-1304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BERKSHIRE PARTNERS Occupation INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11A.299**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	20100000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. MR. JOHN A. KANEB**

Mailing Address **6 KIMBALL LANE**

City State Zip Code  
**LYNNFIELD MA 01940-2682**

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

Name of Employer Occupation  
**THE CATAMOUNT CORPORATION CHAIRMAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**100000.00**

Date of Receipt  
**08 / 29 / 2016**

**Transaction ID : SA11A.293**

Amount of Each Receipt this Period  
**100000.00**

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MR. JOHN W. ROWE**

Mailing Address **PO BOX 805398**

City State Zip Code  
**CHICAGO IL 60680-4183**

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

Name of Employer Occupation  
**EXELON CORPORATION CHAIRMAN EMERITUS**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**25000.00**

Date of Receipt  
**08 / 29 / 2016**

**Transaction ID : SA11A.297**

Amount of Each Receipt this Period  
**25000.00**

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. KENNETH Z. SLATER**

Mailing Address **11 SLOANS CURVE DRIVE**

City State Zip Code  
**PALM BEACH FL 33480-5215**

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

Name of Employer Occupation  
**TREMONT PARTNERS REAL ESTATE**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**10000.00**

Date of Receipt  
**08 / 29 / 2016**

**Transaction ID : SA11A.296**

Amount of Each Receipt this Period  
**10000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **135000.00**

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

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

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

FOR LINE NUMBER: PAGE 14 OF 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. MR. ALEXANDER STUART**

Mailing Address 150 N FIELD DRIVE  
SUITE 100

City State Zip Code  
LAKE FOREST IL 60045-2583

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

Name of Employer Occupation  
NORTH STAR INVESTMENTS PRESIDENT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2016

**Transaction ID : SA11A.298**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 206 W 14TH STREET

City State Zip Code  
SIOUX FALLS SD 57104-6858

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2016

**Transaction ID : SA11A.294**

Amount of Each Receipt this Period  
15000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MR. CHARLES B. JOHNSON**

Mailing Address 1220 SOUTH OCEAN BOULEVARD

City State Zip Code  
PALM BEACH FL 33480-5016

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 ▼  
25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 30 / 2016

**Transaction ID : SA11A.303**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 65000.00

**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 39  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. MR. KENNETH R. FRENCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 85 TRECOTT ROAD  
 City ETNA State NH Zip Code 03750-4505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DARTMOUTH COLLEGE Occupation PROFESSOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : SA11A.310**  
 Amount of Each Receipt this Period 75000.00  
 Memo Item  
 CONTRIBUTION

**B. MR. ROBERT ROSENTHAL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4444 WEST RIVERSIDE DRIVE  
 City BURBANK State CA Zip Code 91505-4073  
 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 ▼ 25000.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : SA11A.304**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
 CONTRIBUTION

**C. MR. WARREN A. STEPHENS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 111 CENTER STREET  
 City LITTLE ROCK State AR Zip Code 72201-4402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer STEPHENS, INC. Occupation CHAIRMAN, PRESIDENT & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500000.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : SA11A.305**  
 Amount of Each Receipt this Period 500000.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 600000.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 16 OF 39  
(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)  
**Senate Leadership Fund**

**A. MR. SAMUEL ZELL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2 NORTH RIVERSIDE PLAZA  
City CHICAGO State IL Zip Code 60606-2600  
FEC ID number of contributing federal political committee. **C**  
Name of Employer EQUITY GROUP INVESTMENTS, LLC Occupation CHAIRMAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 08 / 31 / 2016  
**Transaction ID : SA11A.307**  
Amount of Each Receipt this Period 250000.00  
 Memo Item  
CONTRIBUTION

**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  
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  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250000.00
<b>TOTAL</b> This Period (last page this line number only).....	26800000.00



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

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

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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN CROSSROADS**

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

FEC ID number of contributing federal political committee. **C C00487363**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300000.00

Date of Receipt  
08 / 05 / 2016  
**Transaction ID : SA11C.652**

Amount of Each Receipt this Period  
1000000.00

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC**

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG State IL Zip Code 60173-4973

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
08 / 22 / 2016  
**Transaction ID : SA11A.279**

Amount of Each Receipt this Period  
50000.00

Memo Item  
CONTRIBUTION

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

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

FEC ID number of contributing federal political committee. **C C00487363**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300000.00

Date of Receipt  
08 / 24 / 2016  
**Transaction ID : SA11C.653**

Amount of Each Receipt this Period  
300000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 39  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Senate Leadership Fund**

**A. NATIONAL HEALTH CORPORATION PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 100 VINE STREET  
City MURFREESBORO State TN Zip Code 37130-  
FEC ID number of contributing federal political committee. **C** C00153445  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 25000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 29 / 2016  
**Transaction ID : SA11C.295**  
Amount of Each Receipt this Period  
25000.00  
 Memo Item  
**CONTRIBUTION**

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1375000.00

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. AIR CHARTER SERVICE**

Mailing Address 1055 RXR PLAZA

City UNIONDALE State NY Zip Code 10556

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

Transaction ID : SB21B.I588

Amount of Each Disbursement this Period

348.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. ATCHLEY & ASSOCIATES**

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

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

MM / DD / YYYY  
08 / 03 / 2016

Transaction ID : SB21B.I597

Amount of Each Disbursement this Period

4311.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. GS STRATEGY GROUP LLC**

Mailing Address 702 W IDAHO STE, STE 700

City BOISE State ID Zip Code 83702

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2016

Transaction ID : SB21B.I606

Amount of Each Disbursement this Period

3300.00

Memo Item

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

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

7959.26

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS - FEES**

Mailing Address P.O. BOX 36001

City State Zip Code  
FORT LAUDERDALE FL 33336

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 / D D / Y Y Y Y Y Y  
08 / 04 / 2016

Transaction ID : SB21B.I592

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ARCHIMEDIA**

Mailing Address 45 NORTH HILL DR, STE 100

City State Zip Code  
WARRENTON VA 20186

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 04 / 2016

Transaction ID : SB21B.I596

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BLACK ROCK GROUP LLC**

Mailing Address 66 CANAL CENTER PLAZA, STE 555

City State Zip Code  
ALEXANDRIA VA 22314

Purpose of Disbursement  
CONSULTING, ADVOCACY

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 04 / 2016

Transaction ID : SB21B.I600

Amount of Each Disbursement this Period

4165.00

Memo Item

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

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

9185.00

**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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. CFC CONSULTING INC**

Mailing Address 4100 OLD FLORIDA SHORT ROUTE

City MOUNTAIN BROOK State AL Zip Code 35243

Purpose of Disbursement  
BOOKKEEPING / CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

Transaction ID : **SB21B.I602**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. RED OAK STRATEGIC LLC**

Mailing Address P.O. BOX 2561

City ALEXANDRIA State VA Zip Code 22301

Purpose of Disbursement  
CONSULTING, ADVOCACY

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

Transaction ID : **SB21B.I615**

Amount of Each Disbursement this Period

4250.67

Memo Item

Full Name (Last, First, Middle Initial)

**C. RIVERWOOD STRATEGIES**

Mailing Address 439 E SHORE DRIVE, STE 100

City EAGLE State ID Zip Code 83616

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

Transaction ID : **SB21B.I616**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

8750.67

**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)

**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ROCK CONSULTING LLC**

Mailing Address 5382 MEADOWBROOK ROAD

City BIRMINGHAM State AL Zip Code 35242

Purpose of Disbursement  
BOOKKEEPING / CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2016

Transaction ID : SB21B.I617

Amount of Each Disbursement this Period

525.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AIR CHARTER SERVICE**

Mailing Address 1055 RXR PLAZA

City UNIONDALE State NY Zip Code 10556

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

Transaction ID : SB21B.I589

Amount of Each Disbursement this Period

10687.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES LLC**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2016

Transaction ID : SB21B.I611

Amount of Each Disbursement this Period

102450.00

Memo Item

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

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

113662.00

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. RUNSWITCH LLC**

Mailing Address 9300 SHELBYVILLE ROAD, STE 1005

City LOUISVILLE State KY Zip Code 40222

Purpose of Disbursement  
CONSULTING, MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

**Transaction ID : SB21B.I618**

Amount of Each Disbursement this Period

3300.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

**Transaction ID : SB21B.I591**

Amount of Each Disbursement this Period

18123.61

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD.

City FT. WORTH State TX Zip Code 76155

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

**Transaction ID : SB21B.I628**

Amount of Each Disbursement this Period

6.25

Memo Item

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

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

21423.61

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. BROOK FURNITURE RENTAL INC**

Mailing Address 100 FIELD DRIVE, STE 200

City LAKE FOREST State IL Zip Code 60045

Purpose of Disbursement  
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : SB21B.I629

Amount of Each Disbursement this Period

364.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. CLEVELAND BOTANICAL GARDEN**

Mailing Address 11030 EAST BLVD

City CLEVELAND State OH Zip Code 44106

Purpose of Disbursement  
FACILITY RENTAL / CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : SB21B.I630

Amount of Each Disbursement this Period

6344.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : SB21B.I631

Amount of Each Disbursement this Period

375.00

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. COMCAST**

Mailing Address 900 MICHIGAN AVE NW

City WASHINGTON State DC Zip Code 20017

Purpose of Disbursement  
UTILITIES - INTERNET

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : SB21B.I632

Amount of Each Disbursement this Period

46.21

Memo Item

Full Name (Last, First, Middle Initial)

**B. CONFERENCE AMERICA**

Mailing Address 7079 UNIVERSITY CT

City MONTGOMERY State AL Zip Code 36117

Purpose of Disbursement  
CONFERENCE CALLS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : SB21B.I633

Amount of Each Disbursement this Period

202.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. FOUNDATION TRANSPORTATION**

Mailing Address 2562 SCRANTON ROAD

City CLEVELAND State OH Zip Code 44113

Purpose of Disbursement  
TRANSPORTATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : SB21B.I637

Amount of Each Disbursement this Period

741.52

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. GODADDY.COM**

Mailing Address 14455 N. HAYDEN ROAD

City State Zip Code  
SCOTTSDALE AZ 85260

Purpose of Disbursement  
INTERNET EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : **SB21B.I638**

Amount of Each Disbursement this Period

123.34

Memo Item

Full Name (Last, First, Middle Initial)

**B. GUERNSEY OFFICE PRODUCTS**

Mailing Address 45070 OLD OX RD

City State Zip Code  
STERLING VA 20166

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : **SB21B.I639**

Amount of Each Disbursement this Period

83.85

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERCONTINENTAL HOTELS**

Mailing Address 3 RAVINIA DRIVE, STE 100

City State Zip Code  
ATLANTA GA 30346

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 / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : **SB21B.I640**

Amount of Each Disbursement this Period

862.58

Memo Item

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

0.00

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. LAZ PARKING**

Mailing Address 1615 L ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PARKING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : **SB21B.I641**

Amount of Each Disbursement this Period

318.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. LEGISTORM**

Mailing Address 6902 PINE ST

City OMAHA State NE Zip Code 68106

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : **SB21B.I642**

Amount of Each Disbursement this Period

260.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. LEXIS-NEXIS**

Mailing Address 9393 SPRINGBORO PIKE

City MIAMISBURG State OH Zip Code 45342

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : **SB21B.I643**

Amount of Each Disbursement this Period

695.09

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. METROPOLITAN AT THE 9**

Mailing Address 2017 E 9TH STREET

City CLEVELAND State OH Zip Code 44115

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  
08 / 11 / 2016

Transaction ID : SB21B.I644

Amount of Each Disbursement this Period

3745.21

Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONAL JOURNAL GROUP INC**

Mailing Address 600 NEW HAMPSHIRE AVE NW, STE 4

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement  
SUBSCRIPTIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : SB21B.I645

Amount of Each Disbursement this Period

3254.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. NESTLE**

Mailing Address 50 COMMERCE WAY

City NORTON State MA Zip Code 02766

Purpose of Disbursement  
FOOD / BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 11 / 2016

Transaction ID : SB21B.I646

Amount of Each Disbursement this Period

41.98

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address TWO VERIZON PLACE

City ALPHARETTA State GA Zip Code 30004

Purpose of Disbursement  
CELL PHONES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : SB21B.I649

Amount of Each Disbursement this Period

273.70

Memo Item

Full Name (Last, First, Middle Initial)

**B. XO PRIME STEAKS**

Mailing Address 500 W SAINT CLAIR AVENUE

City CLEVELAND State OH Zip Code 44113

Purpose of Disbursement  
FOOD / BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 11 / 2016

Transaction ID : SB21B.I651

Amount of Each Disbursement this Period

223.12

Memo Item

Full Name (Last, First, Middle Initial)

**C. APOLLO JETS LLC**

Mailing Address 220 W. 42ND ST, 10TH FLR

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2016

Transaction ID : SB21B.I594

Amount of Each Disbursement this Period

16475.63

Memo Item

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

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

16475.63

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. DT CLIENT SERVICES LLC**

Mailing Address 1101 14TH ST NW, STE 650

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2016

Transaction ID : **SB21B.I605**

Amount of Each Disbursement this Period

144375.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BAUHOUS MEDIA GROUP INC**

Mailing Address 1212 E. EUCLID AVE

City SAN ANTONIO State TX Zip Code 78212

Purpose of Disbursement  
MEDIA PRODUCITON

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2016

Transaction ID : **SB21B.I599**

Amount of Each Disbursement this Period

29709.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. CASCADE STRATEGIES LLC**

Mailing Address 1288 QUAKER HILL DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONSULTING, RESEARCH

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2016

Transaction ID : **SB21B.I601**

Amount of Each Disbursement this Period

10000.00

Memo Item

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

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

184084.21

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. HOLTZMAN VOGEL JOSEFIK**

Mailing Address 45 NORTH HILL DRIVE, STE 100

City WARRENTON State VA Zip Code 20186

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

M M / D D / Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SB21B.I609

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PUBLIC OPINION STRATEGIES LLC**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SB21B.I612

Amount of Each Disbursement this Period

50025.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE TARRANCE GROUP**

Mailing Address 201 N UNION ST, STE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SB21B.I620

Amount of Each Disbursement this Period

64150.07

Memo Item

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

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

129175.07

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. VOTER / CONSUMER RESEARCH INC**

Mailing Address P.O. BOX 130607

City HOUSTON State TX Zip Code 77219

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 18 / 2016

Transaction ID : **SB21B.I621**

Amount of Each Disbursement this Period

30600.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. APOLLO JETS LLC**

Mailing Address 220 W. 42ND ST, 10TH FLR

City NEW YORK State NY Zip Code 10036

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2016

Transaction ID : **SB21B.I595**

Amount of Each Disbursement this Period

6885.85

Memo Item

Full Name (Last, First, Middle Initial)

**C. DISH NETWORK LLC**

Mailing Address P.O. BOX 6620

City ENGLEWOOD State CO Zip Code 80155

Purpose of Disbursement  
AIRFARE REIMBURSEMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 22 / 2016

Transaction ID : **SB21B.I603**

Amount of Each Disbursement this Period

2080.00

Memo Item

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

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

39565.85



**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. WIDGETMAKR**

Mailing Address 153 SPRING HILL ROAD, STE 400

City State Zip Code  
TYSONS CORNER VA 22182

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 / D D / Y Y Y Y Y  
08 / 22 / 2016

Transaction ID : **SB21B.I622**

Amount of Each Disbursement this Period

250.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS - FEES**

Mailing Address P.O. BOX 36001

City State Zip Code  
FORT LAUDERDALE FL 33336

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 / D D / Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : **SB21B.I593**

Amount of Each Disbursement this Period

1445.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. DR. W.E. BOSARGE**

Mailing Address 4203 YOAKUM BLVD, STE 200

City State Zip Code  
HOUSTON TX 77006

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : **SB21B.I604**

Amount of Each Disbursement this Period

484.00

Memo Item

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

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

2179.45

**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

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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. ATCHLEY & ASSOCIATES**

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

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 / D D / Y Y Y Y Y Y  
08 / 25 / 2016

Transaction ID : SB21B.I598

Amount of Each Disbursement this Period

899.50

Memo Item

Full Name (Last, First, Middle Initial)

**B. HIGHWOOD CAPITAL LLC**

Mailing Address 915 E STREET NW, #613

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
DONOR DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 25 / 2016

Transaction ID : SB21B.I608

Amount of Each Disbursement this Period

2812.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. LISA WAGNER AND COMPANY INC**

Mailing Address 1211 WEST 22ND - STE 600

City OAK BROOK State IL Zip Code 60525

Purpose of Disbursement  
DONOR DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 25 / 2016

Transaction ID : SB21B.I610

Amount of Each Disbursement this Period

1750.00

Memo Item

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

5462.00

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. PUBLIC OPINION STRATEGIES LLC**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement POLLING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2016

Transaction ID : **SB21B.I613**

Amount of Each Disbursement this Period: 26975.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 3180 18TH ST

City SAN FRANCISCO State CA Zip Code 94110

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 29 / 2016

Transaction ID : **SB21B.I619**

Amount of Each Disbursement this Period: 3960.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN CROSSROADS**

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement OVERHEAD AND ADMINISTRATIVE SERVICES FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 30 / 2016

Transaction ID : **SB21B.I590**

Amount of Each Disbursement this Period: 54400.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 85335.30

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. GS STRATEGY GROUP LLC**

Mailing Address 702 W IDAHO STE, STE 700

City BOISE State ID Zip Code 83702

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SB21B.I607

Amount of Each Disbursement this Period

59752.48

Memo Item

Full Name (Last, First, Middle Initial)

**B. PUBLIC OPINION STRATEGIES LLC**

Mailing Address 214 NORTH FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SB21B.I614

Amount of Each Disbursement this Period

74290.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

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

134042.48

757300.53

**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)  
**Senate Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. GRANITE STATE SOLUTIONS**

Mailing Address 373 S WILLOW ST #420

City MANCHESTER State NH Zip Code 03103

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 / D D / Y Y Y Y Y Y  
08 / 29 / 2016

Transaction ID : SB23.I623

Amount of Each Disbursement this Period

4800000.00

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

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

4800000.00

4800000.00

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00571703
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>DMM MEDIA</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 12 / 2016
Mailing Address 1911 N. FORT MYER DRIVE, STE 400	Amount <span style="border: 1px solid black; padding: 2px;">13568.72</span>
City State Zip Code ARLINGTON VA 22209	<b>Transaction ID : SE24.627</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 12 / 2016
Purpose of Expenditure TV / AD PRODUCTION - SEE NOTICE FILED 8/12/16	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate EVAN BAYH <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">890268.72</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>MENTZER MEDIA SERVICES INC</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 12 / 2016
Mailing Address 210 W. PENNSYLVANIA AVE, STE 250	Amount <span style="border: 1px solid black; padding: 2px;">876700.00</span>
City State Zip Code TOWSON MD 21204	<b>Transaction ID : SE24.624</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 10 / 2016
Purpose of Expenditure TV / MEDIA PLACEMENT - SEE NOTICE FILED 8/12/16	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate EVAN BAYH <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">890268.72</span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">890268.72</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*CALEB CROSBY* [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
08 / 12 / 2016

Signature \_\_\_\_\_

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Senate Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> C00571703
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name of Payee <b>RICHARD SALES MEDIA</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 26 / 2016</span>
Mailing Address 1702 E HIGHLAND AVE, SUITE 408	Amount <span style="border: 1px solid black; padding: 2px;">4000.00</span>
City State Zip Code PHOENIX AZ 85016	<b>Transaction ID : SE24.625</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 26 / 2016</span>
Purpose of Expenditure WEB AD - SEE NOTICE FILED 8/26/16	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARGARET WOOD HASSAN <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34000.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>TARGETED VICTORY</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 26 / 2016</span>
Mailing Address 1033 NORTH FAIRFAX ST, STE 400	Amount <span style="border: 1px solid black; padding: 2px;">30000.00</span>
City State Zip Code ALEXANDRIA VA 22314	<b>Transaction ID : SE24.626</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 26 / 2016</span>
Purpose of Expenditure ONLINE ADVERTISING - SEE NOTICE FILED 8/26/16	Category/Type <span style="border: 1px solid black; padding: 2px;"> </span>
Name of Federal Candidate MARGARET WOOD HASSAN <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">34000.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">34000.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(c) TOTAL</b> Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;">924268.72</span>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*CALEB CROSBY* [Electronically Filed] Date 08 / 26 / 2016

Signature \_\_\_\_\_