

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Our Principles 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="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3289862.51"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="8356761.37"/>	<input type="text" value="16140705.36"/>
(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="11646623.88"/>	<input type="text" value="16140705.36"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11222701.02"/>	<input type="text" value="15716782.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="423922.86"/>	<input type="text" value="423922.86"/>
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)

Write or Type Committee Name

Our Principles PAC

Report Covering the Period: From: 03 / 01 / 2016 To: 03 / 31 / 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).....	8143005.00	15919555.00
(ii) Unitemized	12319.01	19713.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	8155324.01	15939268.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	200000.00	200000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	8355324.01	16139268.00
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).....	1437.36	1437.36
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))..... ▶	8356761.37	16140705.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	8356761.37	16140705.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	659945.52	773034.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	659945.52	773034.56
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	10552755.50	14933747.94
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	10000.00	10000.00
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)) ..	11222701.02	15716782.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11222701.02	15716782.50

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)	8355324.01	16139268.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	8355324.01	16139268.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	659945.52	773034.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1437.36	1437.36
38. Net Operating Expenditures (subtract Line 37 from Line 36)	658508.16	771597.20

**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 89
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Our Principles PAC

A. David Abroms
 Full Name (Last, First, Middle Initial)
 Mailing Address 3179 Green Valley Road, #622
 City Birmingham State AL Zip Code 35243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation accountant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 2000.00

Date of Receipt 03 / 03 / 2016
Transaction ID : SA11AI.4822
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. Shanti Agarwal
 Full Name (Last, First, Middle Initial)
 Mailing Address 10193 Shireoaks Lane
 City Boca Raton State FL Zip Code 33498
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 06 / 2016
Transaction ID : SA11AI.4924
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Stephen Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Brazos
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 500.00

Date of Receipt 03 / 01 / 2016
Transaction ID : SA11AI.4709
 Amount of Each Receipt this Period 500.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 89
	<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)
Our Principles PAC

A. Stephen Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Brazos
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1500.00**

Date of Receipt **03 / 03 / 2016**
Transaction ID : SA11AI.4824
 Amount of Each Receipt this Period **1000.00**
 Memo Item

B. Stephen Anderson
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Brazos
 City Austin State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self-employed Occupation investor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **3500.00**

Date of Receipt **03 / 07 / 2016**
Transaction ID : SA11AI.4935
 Amount of Each Receipt this Period **2000.00**
 Memo Item

C. Cliff Asness
 Full Name (Last, First, Middle Initial)
 Mailing Address Two Greenwich Plaza
 City Greenwich State CT Zip Code 06830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AQR Capital Management Occupation investment manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000000.00**

Date of Receipt **03 / 04 / 2016**
Transaction ID : SA11AI.4830
 Amount of Each Receipt this Period **1000000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1003000.00
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 89
	<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)
Our Principles PAC

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

Mailing Address 260 Charles

City Waltham State MA Zip Code 02453

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

Name of Employer C.P. Baker & Company Occupation c.e.o.

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
 03 / 06 / 2016

Transaction ID : SA11AI.4914

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 6415 Newstone Drive, #103

City Memphis State TN Zip Code 38135

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

Name of Employer FEC Business Occupation notary

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2016

Transaction ID : SA11AI.5219

Amount of Each Receipt this Period
205.00

Memo Item

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

Mailing Address 10 Sampson Street, #310

City Saddle Brook State NJ Zip Code 07663

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

Name of Employer n/a Occupation homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2016

Transaction ID : SA11AI.5295

Amount of Each Receipt this Period
750.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1455.00

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 89
	<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)
Our Principles PAC

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

Mailing Address 46 Arboredge Way

City Madison State WI Zip Code 53711

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

Name of Employer n/a Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 04 / 2016
Transaction ID : SA11AI.4873

Amount of Each Receipt this Period 2000.00

Memo Item

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

Mailing Address 1058 Eldorado Avenue

City Clearwater State FL Zip Code 33767

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

Name of Employer Cee Bee's Citrus, LLC Occupation citrus farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 03 / 10 / 2016
Transaction ID : SA11AI.5029

Amount of Each Receipt this Period 20000.00

Memo Item

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

Mailing Address 91 Oak Tree Road

City Bluffton State SC Zip Code 29910

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

Name of Employer n/a Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 03 / 08 / 2016
Transaction ID : SA11AI.4974

Amount of Each Receipt this Period 7500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 29500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 89
	(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)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. Ted Cannon

Mailing Address 71 Bluejay

City Irvine State CA Zip Code 92604

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

Name of Employer self-employed Occupation attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2016
Transaction ID : SA11AI.5039

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 312 Elm Street, Suite 2600

City Cincinnati State OH Zip Code 45202

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

Name of Employer Castellini Company Occupation chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 10 / 2016
Transaction ID : SA11AI.5027

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address 801 Rosinante Road

City El Paso State TX Zip Code 79922

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

Name of Employer Seisa Medical Occupation c.e.o.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 07 / 2016
Transaction ID : SA11AI.4949

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105500.00
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 89
	<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)
Our Principles PAC

A. Ryan Clark
Full Name (Last, First, Middle Initial)

Mailing Address 1911 W. Fletcher Street

City Chicago State IL Zip Code 60657

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

Name of Employer Clark Strategic Consulting Occupation finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2016
Transaction ID : SA11AI.4767

Amount of Each Receipt this Period 250.00

Memo Item

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

Mailing Address 77 Water Street, FL 9

City New York State NY Zip Code 10005

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

Name of Employer self-employed Occupation writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 03 / 11 / 2016
Transaction ID : SA11AI.5098

Amount of Each Receipt this Period 100000.00

Memo Item

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

Mailing Address 3819 Maple Avenue

City Dallas State TX Zip Code 75219

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

Name of Employer Crow Holdings Occupation investor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 03 / 01 / 2016
Transaction ID : SA11AI.4721

Amount of Each Receipt this Period 250000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350250.00
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 89
	<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)
Our Principles PAC

Full Name (Last, First, Middle Initial) A. Jason Crowl		Date of Receipt MM / DD / YYYY 03 / 08 / 2016 Transaction ID : SA11AI.4976
Mailing Address 5195 Hoovergate Lane		Amount of Each Receipt this Period 1000.00
City Westerville	State OH	Zip Code 43082
FEC ID number of contributing federal political committee.	C	
Name of Employer Simons Says Stamp	Occupation owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. F. Scott de La Garza		Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11AI.5178
Mailing Address 1010 Hillside Avenue		Amount of Each Receipt this Period 250.00
City Austin	State TX	Zip Code 78704
FEC ID number of contributing federal political committee.	C	
Name of Employer DLG Luce	Occupation attorney	<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. John Dyett		Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11AI.5174
Mailing Address 11111 Santa Monica Blvd., #2250		Amount of Each Receipt this Period 1000.00
City Los Angeles	State CA	Zip Code 90025
FEC ID number of contributing federal political committee.	C	
Name of Employer Salem Partners	Occupation finance	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 89
	<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)
Our Principles PAC

A. Bruce Fancher
Full Name (Last, First, Middle Initial)

Mailing Address 50 Murray Street, #815

City New York State NY Zip Code 10007

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

Name of Employer Apple, Inc. Occupation software engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 01 / 2016
Transaction ID : SA11AI.4717

Amount of Each Receipt this Period 500.00

Memo Item

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

Mailing Address 1860 N. Spirit Road, #3103

City Jackson State WY Zip Code 83001

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

Name of Employer Trans-Tec America Occupation c.e.o.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 07 / 2016
Transaction ID : SA11AI.4929

Amount of Each Receipt this Period 10000.00

Memo Item

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

Mailing Address 9 Hillcrest Court

City South Salem State NY Zip Code 10590

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

Name of Employer n/a Occupation retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2016
Transaction ID : SA11AI.4878

Amount of Each Receipt this Period 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 10750.00

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 89
	<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)
Our Principles PAC

A. Allan B. Hubbard
Full Name (Last, First, Middle Initial)

Mailing Address 5600 Sunset Lane

City Indianapolis State IN Zip Code 46228

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

Name of Employer E&A Industries, Inc. Occupation c.e.o.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
03 / 07 / 2016
Transaction ID : SA11AI.5008

Amount of Each Receipt this Period
10000.00

Memo Item

B. Paul J. Isaac
Full Name (Last, First, Middle Initial)

Mailing Address 75 Prospect Avenue

City Larchmont State NY Zip Code 10538

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

Name of Employer Arbiter Partners Capital Mgmt Occupation analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
03 / 09 / 2016
Transaction ID : SA11AI.5006

Amount of Each Receipt this Period
50000.00

Memo Item

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

Mailing Address 420 E. 72nd Street, #6L

City New York State NY Zip Code 10021

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
03 / 02 / 2016
Transaction ID : SA11AI.4739

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60250.00
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 15 OF 89
	<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)
Our Principles PAC

A. Jan Kelly
Full Name (Last, First, Middle Initial)

Mailing Address 23120 S.E. Black Nugget Road
#R2

City Issaquah State WA Zip Code 98029

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

Name of Employer HPE Occupation computer consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 02 / 2016
Transaction ID : SA11AI.4755

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3964 E. Paradise View Drive

City Paradise Valley State AZ Zip Code 85253

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
03 / 07 / 2016
Transaction ID : SA11AI.4927

Amount of Each Receipt this Period
100000.00

Memo Item

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

Mailing Address 63 Beethoven Avenue

City Waban State MA Zip Code 02468

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

Name of Employer KR Boulevard Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
03 / 03 / 2016
Transaction ID : SA11AI.4820

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 101000.00

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 89
	<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)
Our Principles PAC

A. Roger Klein
Full Name (Last, First, Middle Initial)

Mailing Address 63 Beethoven Avenue

City Waban State MA Zip Code 02468

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

Name of Employer KR Boulevard Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2016

Transaction ID : SA11AI.4875

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 731 Alexander Road

City Princeton State NJ Zip Code 08540

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

Name of Employer CAM Capital Occupation chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2016

Transaction ID : SA11AI.5004

Amount of Each Receipt this Period
250000.00

Memo Item

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

Mailing Address P. O. Box 8188

City Melrose Park State IL Zip Code 60161

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

Name of Employer Starwood Hotels and Resorts Occupation hospitality executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2016

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	251500.00
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 89
	<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)
Our Principles PAC

Full Name (Last, First, Middle Initial) A. Ross Lerner		Date of Receipt
Mailing Address 268 Elizabeth Street, #8		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City	State	Zip Code
New York	NY	10012
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Hightower, Inc.	software technology	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="400.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Robert Liddell		Date of Receipt
Mailing Address 226 Old Farm Road		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2016"/>
City	State	Zip Code
Cranberry Twp	PA	16066
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
n/a	retired	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. David Nicholson		Date of Receipt
Mailing Address 1 Martin Place		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2016"/>
City	State	Zip Code
Grosse Pointe	MI	48230
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
PVS Chemical	c.e.o.	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		<input type="checkbox"/> Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10400.00"/>
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 18 OF 89
	(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)
Our Principles PAC

A. William E. Oberndorf
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 Walnut Street
 City San Francisco State CA Zip Code 94118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Oberndorf Enterprises, LLC Occupation executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750000.00**

Date of Receipt **03 / 10 / 2016**
Transaction ID : SA11AI.5026
 Amount of Each Receipt this Period **250000.00**
 Memo Item

B. Daniel Price
 Full Name (Last, First, Middle Initial)
 Mailing Address 800 Connecticut Avenue, N.W.
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Rock Creek Global Advisors Occupation consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 02 / 2016**
Transaction ID : SA11AI.4749
 Amount of Each Receipt this Period **1000.00**
 Memo Item

C. Marlene Ricketts
 Full Name (Last, First, Middle Initial)
 Mailing Address P. O. Box 31519
 City Omaha State NE Zip Code 68131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **4250000.00**

Date of Receipt **03 / 14 / 2016**
Transaction ID : SA11AI.5130
 Amount of Each Receipt this Period **250000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	501000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 89
	(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)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. Marlene Ricketts

Mailing Address P. O. Box 31519

City State Zip Code
Omaha NE 68131

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

Name of Employer Occupation
n/a retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500000.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2016

Transaction ID : SA11AI.5195

Amount of Each Receipt this Period
250000.00

Memo Item

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

Mailing Address 1029 N. Kensington Street

City State Zip Code
Arlington VA 22205

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

Name of Employer Occupation
US Department of Justice attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2016

Transaction ID : SA11AI.4947

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Shamrock Foods Company

Mailing Address 3900 E. Camelback Road, #300

City State Zip Code
Phoenix AZ 85018

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
MM / DD / YYYY
03 / 07 / 2016

Transaction ID : SA11AI.4931

Amount of Each Receipt this Period
100000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350500.00
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 89
	<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)
Our Principles PAC

A. Paul Singer
Full Name (Last, First, Middle Initial)
Mailing Address 40 W. 57th Street, FL 30
City New York State NY Zip Code 10019
FEC ID number of contributing federal political committee. **C**
Name of Employer Elliott Management Corp. Occupation c.e.o.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1250000.00

Date of Receipt 03 / 15 / 2016
Transaction ID : SA11AI.5152
Amount of Each Receipt this Period 250000.00
 Memo Item

B. Paul Singer
Full Name (Last, First, Middle Initial)
Mailing Address 40 W. 57th Street, FL 30
City New York State NY Zip Code 10019
FEC ID number of contributing federal political committee. **C**
Name of Employer Elliott Management Corp. Occupation c.e.o.
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500000.00

Date of Receipt 03 / 22 / 2016
Transaction ID : SA11AI.5272
Amount of Each Receipt this Period 250000.00
 Memo Item

C. Brad Smith
Full Name (Last, First, Middle Initial)
Mailing Address 7910 S. 3500 E., #C
City Salt Lake City State UT Zip Code 84121
FEC ID number of contributing federal political committee. **C**
Name of Employer Dump Trump, Inc. Occupation sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 08 / 2016
Transaction ID : SA11AI.4966
Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500500.00
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 89
	<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)
Our Principles PAC

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

Mailing Address 6500 Ranging Hills Gate

City Columbia State MD Zip Code 21044

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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2016
Transaction ID : SA11AI.5020

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 2200 Butts Road, #320

City Boca Raton State FL Zip Code 33431

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

Name of Employer Prescott Investors, Inc. Occupation founding partner and president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2016
Transaction ID : SA11AI.5233

Amount of Each Receipt this Period
 25000.00

Memo Item

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

Mailing Address 370 Lexington Avenue, #1104

City New York State NY Zip Code 10017

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

Name of Employer The Sopher Group Occupation real estate broker

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
 03 / 07 / 2016
Transaction ID : SA11AI.4940

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	26200.00
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 89
	<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)
Our Principles PAC

A. Evan Sopher
Full Name (Last, First, Middle Initial)

Mailing Address 370 Lexington Avenue, #1104

City New York State NY Zip Code 10017

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

Name of Employer The Sopher Group Occupation real estate broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 29 / 2016
Transaction ID : SA11AI.5297

Amount of Each Receipt this Period 100.00

Memo Item

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

Mailing Address 19 Turkey Hill Circle

City Westport State CT Zip Code 06880

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

Name of Employer Yale University Occupation finance professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2016
Transaction ID : SA11AI.4945

Amount of Each Receipt this Period 1000.00

Memo Item

C. Warren A. Stephens
Full Name (Last, First, Middle Initial)

Mailing Address 111 Center Street

City Little Rock State AR Zip Code 72201

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

Name of Employer Stephens, Inc. Occupation chairman, president and ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt 03 / 03 / 2016
Transaction ID : SA11AI.4774

Amount of Each Receipt this Period 1000000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1001100.00

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 89
	<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)
Our Principles PAC

A. Thomas Tarzian
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 S. High Street
 City Bloomington State IN Zip Code 47401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sakes Tarzian, Inc. Occupation manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **10000.00**

Date of Receipt **03 / 06 / 2016**
Transaction ID : SA11AI.4918
 Amount of Each Receipt this Period **10000.00**
 Memo Item

B. Gerald Taylor
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 Las Olas Circle, #1002
 City Fort Lauderdale State FL Zip Code 33316
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **03 / 02 / 2016**
Transaction ID : SA11AI.4741
 Amount of Each Receipt this Period **500.00**
 Memo Item

C. Richard Uihlein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1396 N. Waukegan Road
 City Lake Forest State IL Zip Code 60045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Uline Occupation ceo/owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2007500.00**

Date of Receipt **03 / 21 / 2016**
Transaction ID : SA11AI.5222
 Amount of Each Receipt this Period **2000000.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2010500.00
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 89
	<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)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. Nia van der Velden

Mailing Address 4701 Willard Avenue, #1222

City	State	Zip Code
Chevy Chase	MD	20815

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

Name of Employer	Occupation

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
 03 / 02 / 2016
Transaction ID : SA11AI.4771

Amount of Each Receipt this Period
 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Elizabeth Varghese-Kroll

Mailing Address 3100 Fox Valley Drive

City	State	Zip Code
West Friendship	MD	21794

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

Name of Employer	Occupation
XXX	Advisor

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
 03 / 16 / 2016
Transaction ID : SA11AI.5172

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 984 Main Street

City	State	Zip Code
Branford	CT	06405

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

Name of Employer	Occupation
self-employed	investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 04 / 2016
Transaction ID : SA11AI.4828

Amount of Each Receipt this Period
 1500000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500750.00
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 89
	<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)
Our Principles PAC

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

Mailing Address 984 Main Street

City Branford State CT Zip Code 06405

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

Name of Employer self-employed Occupation investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2016
Transaction ID : SA11AI.5197

Amount of Each Receipt this Period
 200000.00

Memo Item

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

Mailing Address 5328 W. Pensacola Avenue

City Chicago State IL Zip Code 60641

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

Name of Employer self-employed Occupation author

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
 03 / 06 / 2016
Transaction ID : SA11AI.4922

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 5328 W. Pensacola Avenue

City Chicago State IL Zip Code 60641

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

Name of Employer self-employed Occupation author

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
 03 / 13 / 2016
Transaction ID : SA11AI.5127

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200600.00
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 26 OF 89
	(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)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. M. Elizabeth Weiss

Mailing Address 1304 Hawthorne Lane

City State Zip Code
Hinsdale IL 60521

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

Name of Employer Occupation
n/a retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 10 / 2016

Transaction ID : SA11AI.5043

Amount of Each Receipt this Period
10000.00

Memo Item

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

Mailing Address 251 Rafael Blvd., N.E.

City State Zip Code
Saint Petersburg FL 33704

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

Name of Employer Occupation
n/a homemaker

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
03 / 01 / 2016

Transaction ID : SA11AI.4713

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 24 Edge Road

City State Zip Code
Atherton CA 94027

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

Name of Employer Occupation
Hewlett Packard Enterprise chief executive officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : SA11AI.4776

Amount of Each Receipt this Period
100000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	▶	110250.00
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 89
	<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)
Our Principles PAC

Full Name (Last, First, Middle Initial) A. Grant Williams			Date of Receipt
Mailing Address 1100 N. Lindbergh Blvd.			<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : SA11AI.4970
Saint Louis	MO	63132	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="7500.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Memo Item	
n/a	retired		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="7500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Mary Wutke			Date of Receipt
Mailing Address 6666 Odana Road, #215			<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : SA11AI.5291
Madison	WI	53719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Memo Item	
self-employed	finance		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Mary Wutke			Date of Receipt
Mailing Address 6666 Odana Road, #215			<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2016"/>
City	State	Zip Code	Transaction ID : SA11AI.5305
Madison	WI	53719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Memo Item	
self-employed	finance		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="750.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="8250.00"/>
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: (check only one)	PAGE 28 OF 89
	<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)
Our Principles PAC

A. Christina Yarbrough
 Full Name (Last, First, Middle Initial)
 Mailing Address 212 Comanche Camp
 City Saltville State VA Zip Code 24370
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 15 / 2016
Transaction ID : SA11AI.5165
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Edward Youn
 Full Name (Last, First, Middle Initial)
 Mailing Address 6135 N. 7th Street
 City Phoenix State AZ Zip Code 85014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer West Star Talk Radio Occupation broadcaster
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 24 / 2016
Transaction ID : SA11AI.5293
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. Leonard Zacks
 Full Name (Last, First, Middle Initial)
 Mailing Address 812 Greenwood Avenue
 City Glencoe State IL Zip Code 60022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer n/a Occupation retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 07 / 2016
Transaction ID : SA11AI.4938
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	8143005.00

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

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

FOR LINE NUMBER: PAGE 29 OF 89
(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)
Our Principles PAC

A. Keep the Promise I

Full Name (Last, First, Middle Initial)
Mailing Address 2 Roosevelt Avenue

City Port Jefferson Station State NY Zip Code 11776

FEC ID number of contributing federal political committee. **C** C00575373

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2016

Transaction ID : SA11C.5212

Amount of Each Receipt this Period
 200000.00

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
 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

SUBTOTAL of Receipts This Page (optional).....▶	200000.00
TOTAL This Period (last page this line number only).....▶	200000.00

**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 30 OF 89
<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 checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Our Principles PAC

A. eDonations.com

Full Name (Last, First, Middle Initial)
Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA15.5184

Amount of Each Receipt this Period
490.86

Memo Item
Refund-Online fundraising

B. eDonations.com

Full Name (Last, First, Middle Initial)
Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1437.36

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 17 / 2016

Transaction ID : SA15.5185

Amount of Each Receipt this Period
946.50

Memo Item
Refund-Online fundraising

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1437.36
TOTAL This Period (last page this line number only).....▶	1437.36

**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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Axis Research, Inc.

Mailing Address 107 S. West Street, PBM 148

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.4779

Amount of Each Disbursement this Period: 19800.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CRC Public Relations

Mailing Address 2760 Eisenhower Avenue 4th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Event registration

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.4955

Amount of Each Disbursement this Period: 300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CRC Public Relations

Mailing Address 2760 Eisenhower Avenue 4th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Public relations consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 09 / 2016

Transaction ID : SB21B.4979

Amount of Each Disbursement this Period: 47500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 67600.00

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Dashboard Light Communications

Mailing Address 300 Madison Street
Unit 223

City Alexandria State VA Zip Code 22314

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
03 / 16 / 2016

Transaction ID : SB21B.5157

Amount of Each Disbursement this Period

20000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Direct voter contact-not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2016

Transaction ID : SB21B.5337

Amount of Each Disbursement this Period

20000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Direct voter contact-printing/not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : SB21B.5332

Amount of Each Disbursement this Period

2125.00

Memo Item

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

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

42125.00

**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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. eDonations.com

Date of Disbursement: MM / DD / YYYY
03 / 02 / 2016

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.4933**

Amount of Each Disbursement this Period: 2063.17

Memo Item

Full Name (Last, First, Middle Initial)

B. eDonations.com

Date of Disbursement: MM / DD / YYYY
03 / 17 / 2016

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.5181**

Amount of Each Disbursement this Period: 6072.67

Memo Item

Full Name (Last, First, Middle Initial)

C. Kathryn Gage

Date of Disbursement: MM / DD / YYYY
03 / 22 / 2016

Mailing Address 312 Third Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Reimbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID : **SB21B.5235**

Amount of Each Disbursement this Period: 1110.98

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9246.82

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Delta Air Lines

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
03 / 03 / 2016

Transaction ID : SB21B.5235.0

Amount of Each Disbursement this Period

738.20

Memo Item

Full Name (Last, First, Middle Initial)

B. Westin Metropolitan Airport

Mailing Address 2501 Worldgateway Place

City Detroit State MI Zip Code 48242

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
03 / 04 / 2016

Transaction ID : SB21B.5235.1

Amount of Each Disbursement this Period

372.78

Memo Item

Full Name (Last, First, Middle Initial)

C. King & Spaulding, LLP

Mailing Address 1700 Pennsylvania Avenue, NW
Suite 200

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.4956

Amount of Each Disbursement this Period

58159.20

Memo Item

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

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

58159.20

**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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. King & Spaulding, LLP

Mailing Address 1700 Pennsylvania Avenue, NW
Suite 200

City Washington State DC Zip Code 20006

Purpose of Disbursement
Legal fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2016

Transaction ID : SB21B.5158

Amount of Each Disbursement this Period

13784.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement-not disseminated

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2016

Transaction ID : SB21B.5199

Amount of Each Disbursement this Period

1050.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement-not disseminated

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 24 / 2016

Transaction ID : SB21B.5282

Amount of Each Disbursement this Period

37490.00

Memo Item

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

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

52324.50

**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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement/advertising-not disseminated

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
03 / 31 / 2016

Transaction ID : SB21B.5374

Amount of Each Disbursement this Period

379090.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Tim Miller

Mailing Address 440 Rhode Island Ave., NW, #402

City Washington State DC Zip Code 20001

Purpose of Disbursement
Communications 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
03 / 23 / 2016

Transaction ID : SB21B.5271

Amount of Each Disbursement this Period

12500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Elliott Schwartz

Mailing Address 3232 Coral Way, Unit 403

City Miami State FL Zip Code 33145

Purpose of Disbursement
Research 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
03 / 22 / 2016

Transaction ID : SB21B.5246

Amount of Each Disbursement this Period

3500.00

Memo Item

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

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

395090.00

**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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. TargetPoint Consulting, Inc.

Mailing Address 66 Canal Center Plaza, #555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 11 / 2016

Transaction ID : SB21B.5060

Amount of Each Disbursement this Period

29400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Wrap Media, LLC

Mailing Address 275 Sacramento Street Suite 400

City San Francisco State CA Zip Code 94111

Purpose of Disbursement
Software development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2016

Transaction ID : SB21B.5160

Amount of Each Disbursement this Period

6000.00

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

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

35400.00

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

659945.52

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 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 checked="" 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)
Our Principles PAC

A. Tea Party Patriots, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 220183

City Chantilly State VA Zip Code 20153

Purpose of Disbursement Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 09 / 2016

Transaction ID : SB29.5011

Amount of Each Disbursement this Period: 10000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

TOTAL This Period (last page this line number only)..... ▶ 10000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Campaign Solutions
Mailing Address: 117 N. St. Asaph Street
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Voter contact-email
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 75477.60
Transaction ID: SE.5094
Date of Disbursement or Obligation: 03/14/2016
Calendar Year-To-Date Per Election for Office Sought: 5193362.44
Disbursement For: Primary

Full Name of Payee: Campaign Solutions
Mailing Address: 117 N. St. Asaph Street
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Voter contact-email
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 9250.00
Transaction ID: SE.5096
Date of Disbursement or Obligation: 03/14/2016
Calendar Year-To-Date Per Election for Office Sought: 70960.54
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 84727.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Campaign Solutions <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 13 / 2016
Mailing Address 117 N. St. Asaph Street	Amount 985.00
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5132 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 14 / 2016
Purpose of Expenditure Voter contact-email Category/Type 	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: <u> </u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 1099917.55	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u> </u>

Full Name of Payee Campaign Solutions <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 13 / 2016
Mailing Address 117 N. St. Asaph Street	Amount 2863.00
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5134 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 14 / 2016
Purpose of Expenditure Voter contact-email Category/Type 	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: <u> </u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought 382594.60	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ <u> </u>

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7848.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00603621 </div>
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		

Full Name of Payee <input type="checkbox"/> Memo Item Campaign Solutions		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 03 / 13 / 2016 </div>	
Mailing Address 117 N. St. Asaph Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4454.00</div>	
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5136 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 03 / 14 / 2016 </div>		
Purpose of Expenditure Voter contact-email Category/Type	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>IL</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1044293.62</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Campaign Solutions		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 03 / 13 / 2016 </div>	
Mailing Address 117 N. St. Asaph Street		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">4348.00</div>	
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5138 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> MM / DD / YYYY 03 / 14 / 2016 </div>		
Purpose of Expenditure Voter contact-email Category/Type	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>NC</u>		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">4348.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	8802.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin

 Signature

[Electronically Filed] Date MM / DD / YYYY 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Campaign Solutions <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 21 / 2016
Mailing Address 117 N. St. Asaph Street	Amount 4750.00
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Voter contact-email	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
493820.87	

Full Name of Payee Campaign Solutions <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 31 / 2016
Mailing Address 117 N. St. Asaph Street	Amount 15200.00
City State Zip Code Alexandria VA 22314	
Purpose of Expenditure Voter contact-email	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1532672.35	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	19950.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Content Creative Media, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Mailing Address 3380 Tremont Road Suite 290	Amount 764025.00
City State Zip Code Columbus OH 43221	Transaction ID : SE.4787 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 03 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> District: _____
Calendar Year-To-Date Per Election for Office Sought 809454.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Content Creative Media, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 05 / 2016
Mailing Address 3380 Tremont Road Suite 290	Amount 45750.00
City State Zip Code Columbus OH 43221	Transaction ID : SE.4855 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u> District: _____
Calendar Year-To-Date Per Election for Office Sought 3566200.60	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	809775.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Content Creative Media, LLC
Mailing Address: 3380 Tremont Road, Suite 290, Columbus, OH 43221
Purpose of Expenditure: Media placement
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 411750.00
Transaction ID: SE.4857
Date of Disbursement or Obligation: 03/04/2016
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W., Suite 300, Washington, DC 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 892199.22
Transaction ID: SE.4832
Date of Disbursement or Obligation: 03/04/2016
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 461750.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.
Signature: Jamie Jodoin
Date: 04/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 20000.00
City State Zip Code Washington DC 20005	Transaction ID : SE.4834 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>
Calendar Year-To-Date Per Election for Office Sought 20000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 447353.68
City State Zip Code Washington DC 20005	Transaction ID : SE.4837 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 1339552.90	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	467353.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 03 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 41000.00
City State Zip Code Washington DC 20005	Transaction ID : SE.4839 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 41000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 05 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 10000.00
City State Zip Code Washington DC 20005	Transaction ID : SE.4842 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Direct voter contact	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 51000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	51000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 05 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 31292.70
City State Zip Code Washington DC 20005	Transaction ID : SE.4844 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 1370845.60	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 15000.00
City State Zip Code Washington DC 20005	Transaction ID : SE.4957 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ID</u>
Calendar Year-To-Date Per Election for Office Sought 15000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	46292.70
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 2485.92
City State Zip Code Washington DC 20005	Transaction ID : SE.4959 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> ID </u>
Calendar Year-To-Date Per Election for Office Sought 17485.92	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 10 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 167303.82
City State Zip Code Washington DC 20005	Transaction ID : SE.4964 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 08 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> FL </u>
Calendar Year-To-Date Per Election for Office Sought 3742323.04	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	169789.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 07 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 40603.36
City State Zip Code Washington DC 20005	Transaction ID : SE.4983 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 09 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> ID </u>
Calendar Year-To-Date Per Election for Office Sought 61710.54	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 10 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 12437.40
City State Zip Code Washington DC 20005	Transaction ID : SE.4984 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 09 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u> OH </u>
Calendar Year-To-Date Per Election for Office Sought 12437.40	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	53040.76
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Voter contact-telephone calls
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 7490.40
Transaction ID: SE.4986
Date of Disbursement or Obligation: 03/09/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 422695.78

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Voter contact-telephone calls
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 31248.06
Transaction ID: SE.4990
Date of Disbursement or Obligation: 03/09/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 3773571.10

(a) SUBTOTAL of Itemized Independent Expenditures: 38738.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin [Electronically Filed] Date 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
DDC Advocacy
Mailing Address
805 15th Street, N.W.
Suite 300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Online advertising
Category/Type
Name of Federal Candidate
Donald J. Trump
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
79424.40

Date of Public Distribution/Dissemination
03 / 10 / 2016
Amount
66987.00
Transaction ID : SE.4992
Date of Disbursement or Obligation
03 / 09 / 2016
Office Sought:
House Senate
President
State: OH
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
DDC Advocacy
Mailing Address
805 15th Street, N.W.
Suite 300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Online advertising
Category/Type
Name of Federal Candidate
Donald J. Trump
Support Oppose
Calendar Year-To-Date
Per Election for Office Sought
492964.78

Date of Public Distribution/Dissemination
03 / 10 / 2016
Amount
70269.00
Transaction ID : SE.4994
Date of Disbursement or Obligation
03 / 09 / 2016
Office Sought:
House Senate
President
State: IL
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 137256.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.

Jamie Jodoin
[Electronically Filed]
Date
04 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 03 / 09 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text" value="99999999.99"/> 356531.42
City State Zip Code Washington DC 20005	Transaction ID : SE.4997 Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 03 / 09 / 2016
Purpose of Expenditure Direct mail services	Category/Type <input type="text" value=""/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="99999999.99"/> 4130102.52	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 03 / 09 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text" value="99999999.99"/> 87384.40
City State Zip Code Washington DC 20005	Transaction ID : SE.4999 Date of Disbursement or Obligation <input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYYYY"/> 03 / 09 / 2016
Purpose of Expenditure Direct mail services	Category/Type <input type="text" value=""/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text" value="99999999.99"/> 166808.80	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text" value="99999999.99"/> 443915.82
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text" value="99999999.99"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text" value="99999999.99"/>

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.

Jamie Jodoin [Electronically Filed] Date / /
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct mail services
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 91380.08
Transaction ID: SE.5001
Date of Disbursement or Obligation: 03/09/2016
Calendar Year-To-Date Per Election for Office Sought: 584344.86
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising-nationally disseminated
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 10000.00
Transaction ID: SE.5140
Date of Disbursement or Obligation: 03/14/2016
Calendar Year-To-Date Per Election for Office Sought: 437248.56
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 101380.08
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 14 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 30000.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 1129917.55	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 14 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 15000.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: _____ State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 5211234.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	45000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Signature Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
DDC Advocacy
Mailing Address
805 15th Street, N.W.
Suite 300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Advertising
Category/Type
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1306483.35

Date of Public Distribution/Dissemination
03 / 14 / 2016
Amount
25641.00
Transaction ID : SE.5273
Date of Disbursement or Obligation
03 / 16 / 2016
Office Sought:
House
Senate
President
State: OH
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
DDC Advocacy
Mailing Address
805 15th Street, N.W.
Suite 300
City
Washington State
DC Zip Code
20005
Purpose of Expenditure
Advertising
Category/Type
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
23846.00

Date of Public Distribution/Dissemination
03 / 14 / 2016
Amount
3846.00
Transaction ID : SE.5274
Date of Disbursement or Obligation
03 / 16 / 2016
Office Sought:
House
Senate
President
State: DC
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 29487.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.

Jamie Jodoin
[Electronically Filed]
Date
04 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 2000.00
Transaction ID: SE.5209
Date of Disbursement or Obligation: 03/21/2016
Calendar Year-To-Date Per Election for Office Sought: 331147.46
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Voter contact-telephone calls
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 648.54
Transaction ID: SE.5224
Date of Disbursement or Obligation: 03/21/2016
Calendar Year-To-Date Per Election for Office Sought: 331796.00
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 20648.54
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy	<input type="checkbox"/> Memo Item
Mailing Address 805 15th Street, N.W. Suite 300	
City Washington	State DC
Zip Code 20005	
Purpose of Expenditure Voter contact-telephone calls	Category/ Type

Date of Public Distribution/Dissemination 03 / 21 / 2016
Amount 68294.24
Transaction ID : SE.5258 Date of Disbursement or Obligation 03 / 21 / 2016

Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support	Office Sought: <input type="checkbox"/> House District: _____
	<input checked="" type="checkbox"/> Oppose	<input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought 423589.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Date of Public Distribution/Dissemination 03 / 21 / 2016
Amount 65481.63
Transaction ID : SE.5260 Date of Disbursement or Obligation 03 / 21 / 2016

Full Name of Payee DDC Advocacy	<input type="checkbox"/> Memo Item
Mailing Address 805 15th Street, N.W. Suite 300	
City Washington	State DC
Zip Code 20005	
Purpose of Expenditure Online advertising	Category/ Type

Date of Public Distribution/Dissemination 03 / 21 / 2016
Amount 489070.87
Transaction ID : SE.5260 Date of Disbursement or Obligation 03 / 21 / 2016

Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support	Office Sought: <input type="checkbox"/> House District: _____
	<input checked="" type="checkbox"/> Oppose	<input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought 489070.87		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Date of Public Distribution/Dissemination 03 / 21 / 2016
Amount 133775.87
Transaction ID : SE.5260 Date of Disbursement or Obligation 03 / 21 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	133775.87
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date 04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 03 / 22 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 25000.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
25000.00	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 03 / 22 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 11840.04
City State Zip Code Washington DC 20005	
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
36840.04	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	36840.04
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date 04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct mail services
Name of Federal Candidate: Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought: 214926.60
Date of Public Distribution/Dissemination: 03/23/2016
Amount: 178086.56
Transaction ID: SE.5266
Date of Disbursement or Obligation: 03/21/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought: 1289698.15
Date of Public Distribution/Dissemination: 03/25/2016
Amount: 50000.00
Transaction ID: SE.5287
Date of Disbursement or Obligation: 03/25/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 228086.56
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2015
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 24 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 931.98
City State Zip Code Washington DC 20005	Transaction ID : SE.5289 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1290630.13	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 29 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 136812.60
City State Zip Code Washington DC 20005	Transaction ID : SE.5299 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1427442.73	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	137744.58
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 29 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 10896.48
City State Zip Code Washington DC 20005	Transaction ID : SE.5301 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1438339.21	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 30 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 573.00
City State Zip Code Washington DC 20005	Transaction ID : SE.5310 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 30 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1507572.21	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11469.48
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought: 1513982.21
Date of Public Distribution/Dissemination: 03/31/2016
Amount: 6410.00
Transaction ID: SE.5312
Date of Disbursement or Obligation: 03/30/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought: 5389653.02
Date of Public Distribution/Dissemination: 03/14/2016
Amount: 140000.00
Transaction ID: SE.5306
Date of Disbursement or Obligation: 03/31/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 146410.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 30 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 990.14
City State Zip Code Washington DC 20005	Transaction ID : SE.5308 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 31 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1514472.35	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 31 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 96762.64
City State Zip Code Washington DC 20005	Transaction ID : SE.5321 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 31 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1629434.99	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	97252.78
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text"/>
City State Zip Code Washington DC 20005	Transaction ID : SE.5329 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Voter contact-telephone calls	Category/Type <input type="text"/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee GCW Media Services <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1215 K Street Suite 2260	Amount <input type="text"/>
City State Zip Code Sacramento CA 95814	Transaction ID : SE.4849 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Media placement	Category/Type <input type="text"/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

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.

Jamie Jodoin [Electronically Filed] Date / /

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee GCW Media Services <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 60000.00
City State Zip Code Sacramento CA 95814	Transaction ID : SE.5085 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 09 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 4788102.52	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee GCW Media Services <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 10 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 450000.00
City State Zip Code Sacramento CA 95814	Transaction ID : SE.5090 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 09 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 622933.80	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1050000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER C C00603621	
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		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee GCW Media Services		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2016	
Mailing Address 1215 K Street Suite 2260				Amount 450000.00	
City Sacramento	State CA	Zip Code 95814		Transaction ID : SE.5092	
Purpose of Expenditure Media placement		Category/Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 03 / 09 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought		1072933.80		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee GCW Media Services		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2016	
Mailing Address 1215 K Street Suite 2260				Amount 300000.00	
City Sacramento	State CA	Zip Code 95814		Transaction ID : SE.5082	
Purpose of Expenditure Media placement		Category/Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 03 / 11 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		5117884.84		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	750000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin
Signature

[Electronically Filed]

Date M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee GCW Media Services <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 117728.00
City State Zip Code Sacramento CA 95814	
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 1247645.55	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee GCW Media Services <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 15 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 33068.00
City State Zip Code Sacramento CA 95814	
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 5244302.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	150796.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00603621 </div>
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	

Full Name of Payee <input type="checkbox"/> Memo Item GCW Media Services	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 33068.00
City State Zip Code Sacramento CA 95814	Transaction ID : SE.5240 Date of Disbursement or Obligation MM / DD / YYYY 03 / 14 / 2016
Purpose of Expenditure Media placement Category/Type	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 37416.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)

Full Name of Payee <input type="checkbox"/> Memo Item GCW Media Services	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1215 K Street Suite 2260	Amount 33068.00
City State Zip Code Sacramento CA 95814	Transaction ID : SE.5241 Date of Disbursement or Obligation MM / DD / YYYY 03 / 14 / 2016
Purpose of Expenditure Media placement Category/Type	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought 1077361.62	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	66136.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin
 Signature _____ Date **04 / 20 / 2016**

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
GCW Media Services
Mailing Address
1215 K Street
Suite 2260
City
Sacramento State
CA Zip Code
95814
Purpose of Expenditure
Media placement Category/
Type

Date of Public Distribution/Dissemination
03 / 15 / 2016
Amount
33068.00
Transaction ID : SE.5242
Date of Disbursement or Obligation
03 / 14 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
415662.60

Office Sought:
House
Senate
District:
State: MO
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Granite Lists, LLC
Mailing Address
1283 Main Street
City
Dublin State
NH Zip Code
03444
Purpose of Expenditure
Voter contact-emails Category/
Type

Date of Public Distribution/Dissemination
03 / 31 / 2016
Amount
3000.00
Transaction ID : SE.5314
Date of Disbursement or Obligation
03 / 31 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1517472.35

Office Sought:
House
Senate
District:
State: WI
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 36068.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date
04 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1850 M Street, N.W., #235		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4781
Purpose of Expenditure Media production-nationally disseminated	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
		413913.56	

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1850 M Street, N.W., #235		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20036	Transaction ID : SE.4785
Purpose of Expenditure Media production	Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate Donald J. Trump		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	
		45429.22	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

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.

Jamie Jodoin
Signature

Date / /

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee McCarthy Hennings Whalen, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 8818.62
City Washington State DC Zip Code 20036	Transaction ID : SE.4860 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Media production Category/Type 	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 3575019.22	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee McCarthy Hennings Whalen, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 05 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 3455.38
City Washington State DC Zip Code 20036	Transaction ID : SE.4862 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Media production Category/Type 	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought 415205.38	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12274.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
4816932.87
Date of Public Distribution/Dissemination
03 / 10 / 2016
Amount
28830.35
Transaction ID : SE.5064
Date of Disbursement or Obligation
03 / 11 / 2016

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
4817884.84
Date of Public Distribution/Dissemination
03 / 11 / 2016
Amount
951.97
Transaction ID : SE.5068
Date of Disbursement or Obligation
03 / 11 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... 29782.32
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 634.64
City Washington State DC Zip Code 20036	Transaction ID : SE.5069 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Purpose of Expenditure Media production Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH District: _____
Calendar Year-To-Date Per Election for Office Sought 1089895.68	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 5036.87
City Washington State DC Zip Code 20036	Transaction ID : SE.5072 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Purpose of Expenditure Media production Category/Type 	Name of Federal Candidate <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Donald J. Trump Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: OH District: _____
Calendar Year-To-Date Per Election for Office Sought 1094932.55	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5671.51
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production Category/Type

Date of Public Distribution/Dissemination
03 / 11 / 2016
Amount
4731.60
Transaction ID : SE.5074
Date of Disbursement or Obligation
03 / 11 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
379731.60

Office Sought:
House
Senate
President
State: MO
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production Category/Type

Date of Public Distribution/Dissemination
03 / 11 / 2016
Amount
5494.76
Transaction ID : SE.5076
Date of Disbursement or Obligation
03 / 11 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
1039839.62

Office Sought:
House
Senate
President
State: IL
Disbursement For:
Primary
General
Other (specify)

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 10226.36. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (c) TOTAL Independent Expenditures.

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.

Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Amount
2871.78
Transaction ID : SE.5102
Date of Disbursement or Obligation
03 / 14 / 2016

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production-nationally disseminated
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Amount
18750.00
Transaction ID : SE.5100
Date of Disbursement or Obligation
03 / 16 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... 21621.78
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
1280842.35
Date of Public Distribution/Dissemination
03 / 14 / 2016
Amount
33196.80
Transaction ID : SE.5205
Date of Disbursement or Obligation
03 / 16 / 2016

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Calendar Year-To-Date
Per Election for Office Sought
5249653.02
Date of Public Distribution/Dissemination
03 / 14 / 2016
Amount
5350.80
Transaction ID : SE.5206
Date of Disbursement or Obligation
03 / 16 / 2016

(a) SUBTOTAL of Itemized Independent Expenditures..... 38547.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER C C00603621
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		MM / DD / YYYY

Full Name of Payee McCarthy Hennings Whalen, Inc.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 19 / 2016
Mailing Address 1850 M Street, N.W., #235			Amount 27300.00
City Washington	State DC	Zip Code 20036	Transaction ID : SE.5207
Purpose of Expenditure Media production	Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 03 / 16 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: UT
Calendar Year-To-Date Per Election for Office Sought		27300.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee McCarthy Hennings Whalen, Inc.		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 14 / 2016
Mailing Address 1850 M Street, N.W., #235			Amount 5350.80
City Washington	State DC	Zip Code 20036	Transaction ID : SE.5243
Purpose of Expenditure Media production	Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY 03 / 16 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		1082712.42	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	32650.80
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin [Electronically Filed] Date **04 / 20 / 2016**

Signature

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

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00603621 </div>
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	

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 14 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 5350.80
City Washington State DC Zip Code 20036	Transaction ID : SE.5244 Date of Disbursement or Obligation MM / DD / YYYY 03 / 16 / 2016
Purpose of Expenditure Media production Category/Type	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 42766.80	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NC Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Whalen, Inc.	Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 14 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 5350.80
City Washington State DC Zip Code 20036	Transaction ID : SE.5245 Date of Disbursement or Obligation MM / DD / YYYY 03 / 16 / 2016
Purpose of Expenditure Media production Category/Type	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 421013.40	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MO Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10701.60
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin

Signature _____ [Electronically Filed] Date MM / DD / YYYY
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Amount
24897.46
Transaction ID : SE.5203
Date of Disbursement or Obligation
03 / 21 / 2016
Calendar Year-To-Date
Per Election for Office Sought
311147.46

Full Name of Payee
McCarthy Hennings Whalen, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20036
Purpose of Expenditure
Media production
Category/Type
Name of Federal Candidate
Donald J. Trump
Office Sought:
President
Disbursement For:
Primary
Amount
2049.00
Transaction ID : SE.5228
Date of Disbursement or Obligation
03 / 21 / 2016
Calendar Year-To-Date
Per Election for Office Sought
355295.00

(a) SUBTOTAL of Itemized Independent Expenditures..... 26946.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee McCarthy Hennings Whalen, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 11359.51
City State Zip Code Washington DC 20036	Transaction ID : SE.5278 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Purpose of Expenditure Media production	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1227580.54	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Medium Buying, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 3380 Tremont Road	Amount 375000.00
City State Zip Code Columbus OH 43221	Transaction ID : SE.5078 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 10 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 375000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	386359.51
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee Medium Buying, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 11 / 2016
Mailing Address 3380 Tremont Road	Amount 45000.00
City State Zip Code Columbus OH 43221	
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 10 / 2016
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IL</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
1034344.86	

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 19 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 258950.00
City State Zip Code Towson MD 21204	
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 18 / 2016
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
286250.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	708950.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 21450.00
City State Zip Code Towson MD 21204	Transaction ID : SE.5226 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 03 / 21 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought 353246.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 03 / 25 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 962510.00
City State Zip Code Towson MD 21204	Transaction ID : SE.5283 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 03 / 24 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1182087.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	983960.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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.

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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Check if 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee SPL Strategies, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 02 / 2016
Mailing Address 107 S. West Street, #461	Amount 13335.00
City Alexandria State VA Zip Code 22314	Transaction ID : SE.4790 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 03 / 2016
Purpose of Expenditure Media production-nationally disseminated	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 427248.56	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee SPL Strategies, LLC <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Mailing Address 107 S. West Street, #461	Amount 9805.00
City Alexandria State VA Zip Code 22314	Transaction ID : SE.4851 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 04 / 2016
Purpose of Expenditure Media production	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought 3520450.60	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	23140.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Jamie Jodoin
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: SPL Strategies, LLC
Mailing Address: 107 S. West Street, #461
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media production
Name of Federal Candidate: Donald J. Trump
Date of Public Distribution/Dissemination: 03/09/2016
Amount: 16327.24
Transaction ID: SE.5035
Date of Disbursement or Obligation: 03/11/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee: SPL Strategies, LLC
Mailing Address: 107 S. West Street, #461
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media production
Name of Federal Candidate: Donald J. Trump
Date of Public Distribution/Dissemination: 03/25/2016
Amount: 12117.61
Transaction ID: SE.5280
Date of Disbursement or Obligation: 03/25/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 28444.85
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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.

Jamie Jodoin
[Electronically Filed]
Date: 04/20/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Targeted Victory
Mailing Address 1033 N. Fairfax Street Suite 400
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Voter contact-telephone calls
Name of Federal Candidate Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought 21107.18
Date of Public Distribution/Dissemination 03 / 07 / 2016
Amount 3621.26
Transaction ID : SE.4961
Date of Disbursement or Obligation 03 / 08 / 2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee Targeted Victory
Mailing Address 1033 N. Fairfax Street Suite 400
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Voter contact-emails
Name of Federal Candidate Donald J. Trump
Calendar Year-To-Date Per Election for Office Sought 501571.58
Date of Public Distribution/Dissemination 03 / 21 / 2016
Amount 7750.71
Transaction ID : SE.5249
Date of Disbursement or Obligation 03 / 22 / 2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures 11371.97
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Signature Jamie Jodoin [Electronically Filed] Date 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER ▼ C C00603621
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		MM / DD / YYYY

Full Name of Payee Targeted Victory		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 22 / 2016	
Mailing Address 1033 N. Fairfax Street Suite 400				Amount 3100.28	
City Alexandria	State VA	Zip Code 22314		Transaction ID : SE.5251	
Purpose of Expenditure Voter contact-emails		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 03 / 22 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought		504671.86		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Targeted Victory		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 22 / 2016	
Mailing Address 1033 N. Fairfax Street Suite 400				Amount 4650.43	
City Alexandria	State VA	Zip Code 22314		Transaction ID : SE.5255	
Purpose of Expenditure Voter contact-emails		Category/Type		Date of Disbursement or Obligation MM / DD / YYYY 03 / 22 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought		219577.03		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7750.71
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Jamie Jodoin
Signature

[Electronically Filed]

Date MM / DD / YYYY
04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
TargetPoint Consulting, Inc.
Mailing Address
66 Canal Center Plaza, #555
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Research Category/
Type

Date of Public Distribution/Dissemination
03 / 09 / 2016
Amount
58000.00
Transaction ID : SE.5033
Date of Disbursement or Obligation
03 / 09 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Office Sought:
President
Senate
State: FL

Disbursement For:
Primary
General
Other (specify)

Calendar Year-To-Date
Per Election for Office Sought
4188102.52
Full Name of Payee
TargetPoint Consulting, Inc.
Mailing Address
66 Canal Center Plaza, #555
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Research Category/
Type

Date of Public Distribution/Dissemination
03 / 30 / 2016
Amount
68660.00
Transaction ID : SE.5303
Date of Disbursement or Obligation
03 / 25 / 2016

Name of Federal Candidate
Donald J. Trump
Support
Oppose
Office Sought:
President
Senate
State: WI

Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 126660.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.

Jamie Jodoin

[Electronically Filed]

Date

04 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
The Tarrance Group, Inc.
Mailing Address
201 N. Union Street
Suite 410
City
Alexandria
State
VA
Zip Code
22314
Purpose of Expenditure
Research
Category/Type
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
842199.22

Date of Public Distribution/Dissemination
03 / 07 / 2016
Amount
32745.00
Transaction ID : SE.4847
Date of Disbursement or Obligation
03 / 03 / 2016
Office Sought:
House
Senate
President
State: FL
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
The Tarrance Group, Inc.
Mailing Address
201 N. Union Street
Suite 410
City
Alexandria
State
VA
Zip Code
22314
Purpose of Expenditure
Research
Category/Type
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Calendar Year-To-Date
Per Election for Office Sought
172933.80

Date of Public Distribution/Dissemination
03 / 10 / 2016
Amount
6125.00
Transaction ID : SE.5062
Date of Disbursement or Obligation
03 / 09 / 2016
Office Sought:
House
Senate
President
State: OH
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 38870.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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.
Signature: Jamie Jodoin [Electronically Filed] Date: 04 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
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 M M / D D / Y Y Y Y Y Y	

Full Name of Payee The Tarrance Group, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 03 / 25 / 2016
Mailing Address 201 N. Union Street Suite 410	Amount 34134.00
City State Zip Code Alexandria VA 22314	Transaction ID : SE.5285 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 24 / 2016
Purpose of Expenditure Research <input type="checkbox"/> Category/Type 	Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1216221.03	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y
Mailing Address	Amount
City State Zip Code	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure <input type="checkbox"/> Category/Type 	Name of Federal Candidate
Name of Federal Candidate	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	34134.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	10552755.50

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.

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

Signature _____