

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Americans for Legal Immigration PAC

ADDRESS (number and street) PO Box 30966 Check if different than previously reported. (ACC) Raleigh NC 27622

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00405878 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X]

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

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Cotter, Beverly, , , Type or Print Name of Treasurer

Signature of Treasurer Cotter, Beverly, , , [Electronically Filed] Date 10 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Americans for Legal Immigration 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="897.73"/>	<input type="text" value="897.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3855.64"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="22643.72"/>	<input type="text" value="73133.21"/>
(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="26499.36"/>	<input type="text" value="74030.94"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="25579.52"/>	<input type="text" value="73111.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="919.84"/>	<input type="text" value="919.84"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="-387.50"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Americans for Legal Immigration PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	8728.65	30690.63
(ii) Unitemized .....	12973.86	38845.90
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21702.51	69536.53
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	21702.51	69536.53
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).....	343.74	701.96
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	597.47	2894.72
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)).....▶	22643.72	73133.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	22643.72	73133.21

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	21667.37	65711.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21667.37	65711.45
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) .....	3912.15	3912.15
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	3487.50
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 (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	25579.52	73111.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25579.52	73111.10

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	21702.51	69536.53
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21702.51	69536.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	21667.37	65711.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	343.74	701.96
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21323.63	65009.49

**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 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Baratti, Nancy Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3050 Nassau Drive  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed, Best Effort Occupation (for Individual) Self-Employed, Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 960.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11AI.26320**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Baratti, Nancy Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3050 Nassau Drive  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed, Best Effort Occupation (for Individual) Self-Employed, Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1020.00

Date of Receipt 09 / 13 / 2016  
**Transaction ID : SA11AI.26321**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Donation

**C. Baratti, Nancy Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3050 Nassau Drive  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed, Best Effort Occupation (for Individual) Self-Employed, Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1070.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26322**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	160.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A. Baratti, Nancy Jo, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3050 Nassau Drive  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed, Best Effort Occupation (for Individual) Self-Employed, Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1120.00

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.26323**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4255.00

Date of Receipt 07 / 03 / 2016  
**Transaction ID : SA11AI.26324**  
 Amount of Each Receipt this Period 93.00  
 Memo Item  
 Donation

**C. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4350.00

Date of Receipt 07 / 05 / 2016  
**Transaction ID : SA11AI.26325**  
 Amount of Each Receipt this Period 95.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	238.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4447.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2016

**Transaction ID : SA11AI.26326**

Amount of Each Receipt this Period  
97.00

Memo Item  
Donation

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4539.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2016

**Transaction ID : SA11AI.26328**

Amount of Each Receipt this Period  
92.00

Memo Item  
Donation

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4636.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2016

**Transaction ID : SA11AI.26329**

Amount of Each Receipt this Period  
97.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	286.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4733.00

Date of Receipt 07 / 29 / 2016  
**Transaction ID : SA11AI.26330**  
 Amount of Each Receipt this Period 97.00  
 Memo Item  
 Donation

**B. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4824.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : SA11AI.26331**  
 Amount of Each Receipt this Period 91.00  
 Memo Item  
 Donation

**C. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4917.00

Date of Receipt 08 / 03 / 2016  
**Transaction ID : SA11AI.26332**  
 Amount of Each Receipt this Period 93.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	281.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5014.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2016

**Transaction ID : SA11AI.26333**

Amount of Each Receipt this Period  
97.00

Memo Item  
Donation

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5113.00

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2016

**Transaction ID : SA11AI.26334**

Amount of Each Receipt this Period  
99.00

Memo Item  
Donation

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5203.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2016

**Transaction ID : SA11AI.26336**

Amount of Each Receipt this Period  
90.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	286.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5295.00

Date of Receipt 08 / 23 / 2016  
**Transaction ID : SA11AI.26337**  
 Amount of Each Receipt this Period 92.00  
 Memo Item  
 Donation

**B. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5393.00

Date of Receipt 08 / 28 / 2016  
**Transaction ID : SA11AI.26338**  
 Amount of Each Receipt this Period 98.00  
 Memo Item  
 Donation

**C. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5492.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11AI.26339**  
 Amount of Each Receipt this Period 99.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	289.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Baughman, Jo Ann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5497.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

**Transaction ID : SA11AI.26352**

Amount of Each Receipt this Period  
5.00

Memo Item  
Donation

**B. Baughman, Jo Ann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5593.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2016

**Transaction ID : SA11AI.26340**

Amount of Each Receipt this Period  
96.00

Memo Item  
Donation

**C. Baughman, Jo Ann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5691.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2016

**Transaction ID : SA11AI.26342**

Amount of Each Receipt this Period  
98.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	199.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5783.00

Date of Receipt  
 09 / 12 / 2016  
**Transaction ID : SA11AI.26343**  
 Amount of Each Receipt this Period 92.00  
 Memo Item  
 Donation

**B. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5876.00

Date of Receipt  
 09 / 13 / 2016  
**Transaction ID : SA11AI.26344**  
 Amount of Each Receipt this Period 93.00  
 Memo Item  
 Donation

**C. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5972.00

Date of Receipt  
 09 / 16 / 2016  
**Transaction ID : SA11AI.26345**  
 Amount of Each Receipt this Period 96.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	281.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6070.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

**Transaction ID : SA11AI.26346**

Amount of Each Receipt this Period  
98.00

Memo Item  
Donation

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
6160.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2016

**Transaction ID : SA11AI.26347**

Amount of Each Receipt this Period  
90.00

Memo Item  
Donation

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Baughman, Jo Ann, , ,

Mailing Address PO Box 1269

City Philomath	State OR	Zip Code 97370
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
6252.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

**Transaction ID : SA11AI.26348**

Amount of Each Receipt this Period  
92.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Baughman, Jo Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 6349.00

Date of Receipt 09 / 27 / 2016  
**Transaction ID : SA11AI.26349**  
 Amount of Each Receipt this Period 97.00  
 Memo Item  
 Donation

**B. Beck, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2799 Highland View Circle  
 City Clermont State FL Zip Code 34711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt 08 / 03 / 2016  
**Transaction ID : SA11AI.26350**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**C. Beck, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2799 Highland View Circle  
 City Clermont State FL Zip Code 34711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 08 / 25 / 2016  
**Transaction ID : SA11AI.26351**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	117.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Beck, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2799 Highland View Circle  
 City Clermont State FL Zip Code 34711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 30.00

Date of Receipt 09 / 06 / 2016  
**Transaction ID : SA11AI.26353**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**B. Beck, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2799 Highland View Circle  
 City Clermont State FL Zip Code 34711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 40.00

Date of Receipt 09 / 13 / 2016  
**Transaction ID : SA11AI.26355**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**C. Beck, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2799 Highland View Circle  
 City Clermont State FL Zip Code 34711  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 20 / 2016  
**Transaction ID : SA11AI.26354**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Beck, James, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2799 Highland View Circle

City Clermont	State FL	Zip Code 34711
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2016

**Transaction ID : SA11AI.26356**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

**B. Beganyi, Mary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5704 Crimson Ridge Dr

City Las Vegas	State NV	Zip Code 89130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2016

**Transaction ID : SA11AI.26357**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

**C. Beganyi, Mary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5704 Crimson Ridge Dr

City Las Vegas	State NV	Zip Code 89130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  

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

**Transaction ID : SA11AI.26358**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	105.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Beganyi, Mary, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5704 Crimson Ridge Dr

City Las Vegas	State NV	Zip Code 89130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2016

**Transaction ID : SA11AI.26359**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

**B. Chapman, Jerry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 63rd St Ocean W

City Marathon	State FL	Zip Code 33050
------------------	-------------	-------------------

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

Name of Employer (for Individual) REtired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2016

**Transaction ID : SA11AI.26360**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

**C. Chapman, Jerry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 63rd St Ocean W

City Marathon	State FL	Zip Code 33050
------------------	-------------	-------------------

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

Name of Employer (for Individual) REtired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
580.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2016

**Transaction ID : SA11AI.26361**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A. Chapman, Jerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 901 63rd St Ocean W  
 City Marathon State FL Zip Code 33050  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REtired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 630.00

Date of Receipt 09 / 12 / 2016  
**Transaction ID : SA11AI.26362**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Cillo, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1585 Hwy 70  
 City Kyles Ford State TN Zip Code 37765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 09 / 2016  
**Transaction ID : SA11AI.26363**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Donation

**C. Cillo, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1585 Hwy 70  
 City Kyles Ford State TN Zip Code 37765  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26364**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Conway, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Ewing Dr.  
 City Goldsboro State NC Zip Code 27530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 01 / 2016  
**Transaction ID : SA11AI.26365**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Conway, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Ewing Dr.  
 City Goldsboro State NC Zip Code 27530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2016  
**Transaction ID : SA11AI.26366**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. Conway, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 Ewing Dr.  
 City Goldsboro State NC Zip Code 27530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.26367**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 OF 81
	(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)  
**Americans for Legal Immigration PAC**

**A. Cook, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4171 Hi-Hill Dr  
 City Lapeer State MI Zip Code 48446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.98

Date of Receipt **07 / 25 / 2016**  
**Transaction ID : SA11AI.26368**  
 Amount of Each Receipt this Period 13.00  
 Memo Item  
 Donation

**B. Cook, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4171 Hi-Hill Dr  
 City Lapeer State MI Zip Code 48446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 357.98

Date of Receipt **08 / 04 / 2016**  
**Transaction ID : SA11AI.26369**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Donation

**C. Cook, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4171 Hi-Hill Dr  
 City Lapeer State MI Zip Code 48446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 367.98

Date of Receipt **08 / 12 / 2016**  
**Transaction ID : SA11AI.26370**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	43.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Cook, Jason, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4171 Hi-Hill Dr

City Lapeer	State MI	Zip Code 48446
----------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
377.98

Date of Receipt  

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

**Transaction ID : SA11AI.26371**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

**B. Cook, Jason, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4171 Hi-Hill Dr

City Lapeer	State MI	Zip Code 48446
----------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
381.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2016

**Transaction ID : SA11AI.26372**

Amount of Each Receipt this Period  
3.65

Memo Item  
Donation

**C. Cook, Jason, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4171 Hi-Hill Dr

City Lapeer	State MI	Zip Code 48446
----------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
396.63

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2016

**Transaction ID : SA11AI.26373**

Amount of Each Receipt this Period  
15.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	28.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Cook, Jason, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4171 Hi-Hill Dr  
 City Lapeer State MI Zip Code 48446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 406.63

Date of Receipt 09 / 30 / 2016  
**Transaction ID : SA11AI.26374**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**B. Cumbie, Jerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1186 Oak Ridge Dr  
 City Terrell State TX Zip Code 75160  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 17 / 2016  
**Transaction ID : SA11AI.26376**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Donation

**C. Curtis, Cecilia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6737 Timbers Dr  
 City Evergreen State CO Zip Code 80439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : SA11AI.26377**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Curtis, Cecilia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6737 Timbers Dr  
 City Evergreen State CO Zip Code 80439  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 09 / 20 / 2016  
**Transaction ID : SA11AI.26378**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Davis, Pam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 55 Hacienda Carmel  
 City Carmel State CA Zip Code 93923  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting reply Occupation (for Individual) Awaiting reply  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt 09 / 17 / 2016  
**Transaction ID : SA11AI.26379**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**C. Eischens, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19239 Peel Dock Road  
 City Wellesley Island State NY Zip Code 13640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ESM Schools Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 08 / 07 / 2016  
**Transaction ID : SA11AI.26381**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 OF 81
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Eischens, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19239 Peel Dock Road  
 City Wellesley Island State NY Zip Code 13640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ESM Schools Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt **08 / 27 / 2016**  
**Transaction ID : SA11AI.26382**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Eischens, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 19239 Peel Dock Road  
 City Wellesley Island State NY Zip Code 13640  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ESM Schools Occupation (for Individual) Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt **09 / 18 / 2016**  
**Transaction ID : SA11AI.26383**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. Flaherty, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 Southern Cove  
 City Cabot State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 170.00

Date of Receipt **08 / 05 / 2016**  
**Transaction ID : SA11AI.26384**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Flaherty, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 Southern Cove  
 City Cabot State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 180.00

Date of Receipt 08 / 08 / 2016  
**Transaction ID : SA11AI.26385**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**B. Flaherty, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 Southern Cove  
 City Cabot State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 21 / 2016  
**Transaction ID : SA11AI.26386**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. Flaherty, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 Southern Cove  
 City Cabot State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 08 / 28 / 2016  
**Transaction ID : SA11AI.26387**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 OF 81
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Flaherty, Joe, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3316 Southern Cove  
 City Cabot State AR Zip Code 72023  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt **09 / 29 / 2016**  
**Transaction ID : SA11AI.26388**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Gabel, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3664 S. Lakeshore Drive  
 City Byrnes Mill State MO Zip Code 63051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 115.00

Date of Receipt **07 / 16 / 2016**  
**Transaction ID : SA11AI.26389**  
 Amount of Each Receipt this Period 15.00  
 Memo Item  
 Donation

**C. Gabel, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3664 S. Lakeshore Drive  
 City Byrnes Mill State MO Zip Code 63051  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 125.00

Date of Receipt **08 / 25 / 2016**  
**Transaction ID : SA11AI.26390**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Gabel, Ann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3664 S. Lakeshore Drive

City Byrnes Mill	State MO	Zip Code 63051
---------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Best Effort
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
145.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2016

**Transaction ID : SA11AI.26391**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**B. Gabel, Ann, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3664 S. Lakeshore Drive

City Byrnes Mill	State MO	Zip Code 63051
---------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Best Effort
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
165.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2016

**Transaction ID : SA11AI.26392**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**C. Gynn, Rick, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 fiddlers knoll ct.

City Kernersville	State NC	Zip Code 27284
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Starr Ele. Inc	Occupation (for Individual) Helpdesk Admin.
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2016

**Transaction ID : SA11AI.26394**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	90.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Harris, HESSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12901 Bluet Lane  
 City Silver Springs State MD Zip Code 20906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compliance, Inc. Occupation (for Individual) General Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2600.00

Date of Receipt 07 / 01 / 2016  
**Transaction ID : SA11AI.26395**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. Harris, HESSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12901 Bluet Lane  
 City Silver Springs State MD Zip Code 20906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compliance, Inc. Occupation (for Individual) General Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 07 / 22 / 2016  
**Transaction ID : SA11AI.26396**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Harris, HESSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12901 Bluet Lane  
 City Silver Springs State MD Zip Code 20906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compliance, Inc. Occupation (for Individual) General Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 08 / 08 / 2016  
**Transaction ID : SA11AI.26397**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 81
	(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)  
**Americans for Legal Immigration PAC**

**A. Harris, HESSIE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12901 Bluet Lane  
 City Silver Springs State MD Zip Code 20906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Compliance, Inc. Occupation (for Individual) General Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3250.00

Date of Receipt **09 / 22 / 2016**  
**Transaction ID : SA11AI.26398**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. Hensley, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Linda Vista Dr Space 276  
 City San Marcos State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 15.00

Date of Receipt **07 / 01 / 2016**  
**Transaction ID : SA11AI.26399**  
 Amount of Each Receipt this Period 15.00  
 Memo Item  
 Donation

**C. Hensley, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Linda Vista Dr Space 276  
 City San Marcos State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt **08 / 09 / 2016**  
**Transaction ID : SA11AI.26400**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	525.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Hensley, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Linda Vista Dr  
 Space 276  
 City San Marcos State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.26401**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Hensley, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Linda Vista Dr  
 Space 276  
 City San Marcos State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 60.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2016  
**Transaction ID : SA11AI.26402**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Donation

**C. Hensley, Terry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Linda Vista Dr  
 Space 276  
 City San Marcos State CA Zip Code 92078  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 85.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2016  
**Transaction ID : SA11AI.26403**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A. Hensley, Terry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3535 Linda Vista Dr  
Space 276

City San Marcos	State CA	Zip Code 92078
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2016

**Transaction ID : SA11AI.26404**

Amount of Each Receipt this Period  
15.00

Memo Item  
Donation

**B. Holloman, Clinton, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5302 Leggett Lane

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	18	/	2016

**Transaction ID : SA11AI.26405**

Amount of Each Receipt this Period  
40.00

Memo Item  
Donation

**C. Holloman, Clinton, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5302 Leggett Lane

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
60.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2016

**Transaction ID : SA11AI.26406**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 81
<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)  
**Americans for Legal Immigration PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Holloman, Clinton, , ,

Mailing Address 5302 Leggett Lane

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
70.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2016

**Transaction ID : SA11AI.26407**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Holloman, Clinton, , ,

Mailing Address 5302 Leggett Lane

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
90.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2016

**Transaction ID : SA11AI.26410**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Holloman, Clinton, , ,

Mailing Address 5302 Leggett Lane

City Pearland	State TX	Zip Code 77584
------------------	-------------	-------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
115.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2016

**Transaction ID : SA11AI.26408**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	55.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Holloman, Clinton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5302 Leggett Lane  
 City Pearland State TX Zip Code 77584  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt 09 / 19 / 2016  
**Transaction ID : SA11AI.26409**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Houchens, Jerry, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2428 N. Valencia Ave.  
 City Santa Ana State CA Zip Code 92706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 07 / 18 / 2016  
**Transaction ID : SA11AI.26411**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. Houchens, Jerry, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2428 N. Valencia Ave.  
 City Santa Ana State CA Zip Code 92706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : SA11AI.26412**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Houchens, Jerry, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2428 N. Valencia Ave.  
 City Santa Ana State CA Zip Code 92706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt 09 / 07 / 2016  
**Transaction ID : SA11AI.26413**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Donation

**B. Hurley, Tamara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9575 Pine Meadows Ln  
 City Burke State VA Zip Code 22015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 07 / 2016  
**Transaction ID : SA11AI.26414**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**C. Hurley, Tamara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9575 Pine Meadows Ln  
 City Burke State VA Zip Code 22015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 08 / 2016  
**Transaction ID : SA11AI.26415**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Jones, Stuart, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5530 Mossy Oak Road  
 City Moseley State VA Zip Code 23120  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Chicago Bridge and Iron, Inc. Occupation (for Individual) Nuclear Power Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 120.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : SA11AI.26435**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Donation

**B. Kenney, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Barberry Drive  
 City Benson State NC Zip Code 27504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOHAWK EQUINE SPORTS MASSAGE Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 08 / 07 / 2016  
**Transaction ID : SA11AI.26436**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. Kenney, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Barberry Drive  
 City Benson State NC Zip Code 27504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOHAWK EQUINE SPORTS MASSAGE Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 13 / 2016  
**Transaction ID : SA11AI.26437**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Kenney, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Barberry Drive  
 City Benson State NC Zip Code 27504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOHAWK EQUINE SPORTS MASSAGE Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 75.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26438**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Kenney, Carolyn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 Barberry Drive  
 City Benson State NC Zip Code 27504  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOHAWK EQUINE SPORTS MASSAGE Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 09 / 29 / 2016  
**Transaction ID : SA11AI.26440**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. King, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 997 Meadowlark Ln.  
 City Medina State OH Zip Code 44256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 07 / 01 / 2016  
**Transaction ID : SA11AI.26441**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. King, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 997 Meadowlark Ln.  
 City Medina State OH Zip Code 44256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 09 / 15 / 2016  
**Transaction ID : SA11AI.26442**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. King, Ronald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 W. Highland Ave.  
 City Granite Falls State NC Zip Code 28630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11AI.26443**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. King, Ronald, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 45 W. Highland Ave.  
 City Granite Falls State NC Zip Code 28630  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 45.00

Date of Receipt 09 / 13 / 2016  
**Transaction ID : SA11AI.26444**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	95.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Layel, Jack, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 853  
 City Lake Havasu City State AZ Zip Code 86405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt 08 / 25 / 2016  
**Transaction ID : SA11AI.26445**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**B. Layel, Jack, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 853  
 City Lake Havasu City State AZ Zip Code 86405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 09 / 13 / 2016  
**Transaction ID : SA11AI.26446**  
 Amount of Each Receipt this Period 25.00  
 Memo Item  
 Donation

**C. McCraw, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 Condor Court  
 City Chesapeake State VA Zip Code 23321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IBM Occupation (for Individual) Test Engineer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26447**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 81
	<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)  
**Americans for Legal Immigration PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Porter, Roy, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 04 / 2016
Mailing Address 12013 Taliesin Place Apt. 22		<b>Transaction ID : SA11AI.26416</b>
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retiree	<input type="checkbox"/> Memo Item Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Porter, Roy, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2016
Mailing Address 12013 Taliesin Place Apt. 22		<b>Transaction ID : SA11AI.26417</b>
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retiree	<input type="checkbox"/> Memo Item Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Porter, Roy, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2016
Mailing Address 12013 Taliesin Place Apt. 22		<b>Transaction ID : SA11AI.26418</b>
City Reston	State VA	Zip Code 20190
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retiree	<input type="checkbox"/> Memo Item Donation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Porter, Roy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12013 Taliesin Place  
 Apt. 22  
 City Reston State VA Zip Code 20190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retiree  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26419**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**B. Quimby, Chad, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11800 Sunset Hill Road  
 #211  
 City Reston State VA Zip Code 20190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Declined, Best Effort Occupation (for Individual) Declined, Best Effort  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 08 / 02 / 2016  
**Transaction ID : SA11AI.26420**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Donation

**C. Rigby, Rodney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15627 Century Drive  
 City Hudson State FL Zip Code 34667  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) At Home Computer Service Occupation (for Individual) Declined, Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 09 / 15 / 2016  
**Transaction ID : SA11AI.26421**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Roach, Carlton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1707 Carol Stream Dr.  
 City Richardson State TX Zip Code 75081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Urban Inter-Tribal Center - TX Occupation (for Individual) Urban Inter-Tribal Center - TX  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 08 / 2016  
**Transaction ID : SA11AI.26422**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**B. Roach, Carlton, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1707 Carol Stream Dr.  
 City Richardson State TX Zip Code 75081  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Urban Inter-Tribal Center - TX Occupation (for Individual) Urban Inter-Tribal Center - TX  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2016  
**Transaction ID : SA11AI.26423**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Roth, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15229 NW Casey Dr  
 City Portland State OR Zip Code 97229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt 07 / 11 / 2016  
**Transaction ID : SA11AI.26424**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 OF 81
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Roth, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15229 NW Casey Dr  
 City Portland State OR Zip Code 97229  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 09 / 06 / 2016  
**Transaction ID : SA11AI.26425**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Scott, Derrick, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 326 Sunset Dr  
 City Eden State NC Zip Code 27288-2234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 07 / 19 / 2016  
**Transaction ID : SA11AI.26426**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**C. Scott, Derrick, S., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 326 Sunset Dr  
 City Eden State NC Zip Code 27288-2234  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 190.00

Date of Receipt 08 / 16 / 2016  
**Transaction ID : SA11AI.26427**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Seitz, Maria, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11025 SW 154th Terrace  
 City Miami State FL Zip Code 33157-1246  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Miami Dade College Occupation (for Individual) Adjunct Professor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 12 / 2016  
**Transaction ID : SA11AI.26448**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Donation

**B. Sessa, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Shady Acres Rd.  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting response Occupation (for Individual) Awaiting response  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt 08 / 04 / 2016  
**Transaction ID : SA11AI.26471**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Sessa, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Shady Acres Rd.  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting response Occupation (for Individual) Awaiting response  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 08 / 22 / 2016  
**Transaction ID : SA11AI.26473**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	140.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Sessa, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Shady Acres Rd.  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting response Occupation (for Individual) Awaiting response  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 150.00

Date of Receipt  
 08 / 26 / 2016  
**Transaction ID : SA11AI.26474**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Sessa, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Shady Acres Rd.  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting response Occupation (for Individual) Awaiting response  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 08 / 29 / 2016  
**Transaction ID : SA11AI.26475**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Sessa, Frances, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Shady Acres Rd.  
 City Darien State CT Zip Code 06820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Awaiting response Occupation (for Individual) Awaiting response  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 09 / 21 / 2016  
**Transaction ID : SA11AI.26476**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Shoemaker, Orville, , Mr and Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 State Route 167

City Hop Bottom	State PA	Zip Code 18824-7608
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2016  
**Transaction ID : SA11AI.26428**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**B. Shoemaker, Orville, , Mr and Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 State Route 167

City Hop Bottom	State PA	Zip Code 18824-7608
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 08 / 2016  
**Transaction ID : SA11AI.26429**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**C. Shoemaker, Orville, , Mr and Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 State Route 167

City Hop Bottom	State PA	Zip Code 18824-7608
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2016  
**Transaction ID : SA11AI.26430**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Shoemaker, Orville, , Mr and Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 State Route 167

City Hop Bottom	State PA	Zip Code 18824-7608
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2016  
**Transaction ID : SA11AI.26431**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

**B. Shoemaker, Orville, , Mr and Mrs,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1451 State Route 167

City Hop Bottom	State PA	Zip Code 18824-7608
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 21 / 2016  
**Transaction ID : SA11AI.26432**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**C. Woodbury, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2720 35th Avenue

City San Francisco	State CA	Zip Code 94116
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Declined, Best Effort	Occupation (for Individual) Declined, Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 16 / 2016  
**Transaction ID : SA11AI.26449**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Woodbury, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2720 35th Avenue

City San Francisco	State CA	Zip Code 94116
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Declined, Best Effort	Occupation (for Individual) Declined, Best Effort
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  
 08 / 16 / 2016  
**Transaction ID : SA11AI.26450**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**B. Woodbury, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2720 35th Avenue

City San Francisco	State CA	Zip Code 94116
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Declined, Best Effort	Occupation (for Individual) Declined, Best Effort
--	--

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  
 08 / 28 / 2016  
**Transaction ID : SA11AI.26451**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

**C. Woodbury, Karen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2720 35th Avenue

City San Francisco	State CA	Zip Code 94116
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Declined, Best Effort	Occupation (for Individual) Declined, Best Effort
--	--

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  
 09 / 16 / 2016  
**Transaction ID : SA11AI.26452**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 07 / 01 / 2016  
**Transaction ID : SA11AI.26455**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 07 / 16 / 2016  
**Transaction ID : SA11AI.26456**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 07 / 25 / 2016  
**Transaction ID : SA11AI.26457**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1600.00

Date of Receipt 07 / 30 / 2016  
**Transaction ID : SA11AI.26458**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1650.00

Date of Receipt 08 / 01 / 2016  
**Transaction ID : SA11AI.26459**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 08 / 04 / 2016  
**Transaction ID : SA11AI.26460**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1750.00

Date of Receipt 08 / 08 / 2016  
**Transaction ID : SA11AI.26462**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 25 / 2016  
**Transaction ID : SA11AI.26463**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1850.00

Date of Receipt 08 / 27 / 2016  
**Transaction ID : SA11AI.26464**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 81
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

**A. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt 08 / 29 / 2016  
**Transaction ID : SA11AI.26465**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1950.00

Date of Receipt 09 / 08 / 2016  
**Transaction ID : SA11AI.26466**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 12 / 2016  
**Transaction ID : SA11AI.26467**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 81
	(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)  
**Americans for Legal Immigration PAC**

**A. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 18 / 2016  
**Transaction ID : SA11AI.26453**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Donation

**B. Yeary, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1211 Honey Lake St  
 City Las Vegas State NV Zip Code 89110  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2016  
**Transaction ID : SA11AI.26454**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Donation

**C. Zink, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1648 S. Adams St  
 City Denver State CO Zip Code 80210-2930  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Effort Occupation (for Individual) Best Effort  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2016  
**Transaction ID : SA11AI.26468**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 81
	<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)  
**Americans for Legal Immigration PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Zink, Mike, , ,

Mailing Address 1648 S. Adams St

City Denver	State CO	Zip Code 80210-2930
----------------	-------------	------------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
MM / DD / YYYY  
08 / 10 / 2016

**Transaction ID : SA11AI.26469**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Zink, Mike, , ,

Mailing Address 1648 S. Adams St

City Denver	State CO	Zip Code 80210-2930
----------------	-------------	------------------------

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

Name of Employer (for Individual) Best Effort	Occupation (for Individual) Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
175.00

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2016

**Transaction ID : SA11AI.26470**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	8728.65

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 55 OF 81
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)  
**Americans for Legal Immigration PAC**

**A. Hostmonster**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1958 South 950 East

City Provo	State UT	Zip Code 84606
---------------	-------------	-------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
584.77

Date of Receipt  

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

**Transaction ID : SA15.26300**

Amount of Each Receipt this Period  
284.89

Memo Item  
Refund on Website hosting services

**B.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	284.89
<b>TOTAL</b> This Period (last page this line number only).....	284.89

**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 56 OF 81
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City Mt. View	State CA	Zip Code 94043
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2461.30

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2016

**Transaction ID : SA17.26272**

Amount of Each Receipt this Period  
271.34

Memo Item  
Website advertising revenue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City Mt. View	State CA	Zip Code 94043
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2604.49

Date of Receipt  

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

**Transaction ID : SA17.26274**

Amount of Each Receipt this Period  
143.19

Memo Item  
Website advertising revenue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City Mt. View	State CA	Zip Code 94043
------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2787.43

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

**Transaction ID : SA17.26273**

Amount of Each Receipt this Period  
182.94

Memo Item  
Website advertising revenue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	597.47
<b>TOTAL</b> This Period (last page this line number only).....	597.47



**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"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial) <b>A. Amazon.com Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 14 / 2016
Mailing Address 1200 12th Ave S # 1200		FEC Identification Number C <b>Transaction ID : SB21B.26288</b> Amount of Each Disbursement this Period 181.99
City Seattle	State WA	
Zip Code 98104	Purpose of Disbursement Office supplies and equipment	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Amazon.com Inc</b>		Date of Disbursement MM / DD / YYYY 07 / 15 / 2016
Mailing Address 1200 12th Ave S # 1200		FEC Identification Number C <b>Transaction ID : SB21B.26289</b> Amount of Each Disbursement this Period 165.22
City Seattle	State WA	
Zip Code 98104	Purpose of Disbursement Office supplies and equipment	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Corporate Payroll Service</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2016
Mailing Address 1000 Miller Court West		FEC Identification Number C <b>Transaction ID : SB21B.2628c</b> Amount of Each Disbursement this Period 1420.59
City Norcross	State GA	
Zip Code 30071	Purpose of Disbursement Payroll tax	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1767.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Corporate Payroll Service**

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement  
Fee for payroll service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26278  
Amount of Each Disbursement this Period  
44.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. Corporate Payroll Service**

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement  
Payroll tax

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26281  
Amount of Each Disbursement this Period  
1404.52

Memo Item

Full Name (Last, First, Middle Initial)

**C. Corporate Payroll Service**

Mailing Address 1000 Miller Court West

City Norcross State GA Zip Code 30071

Purpose of Disbursement  
Fee for payroll service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26278  
Amount of Each Disbursement this Period  
136.90

Memo Item

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

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

1586.37

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial) <b>A. Dotster Inc.</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2016
Mailing Address PO Box 821066		FEC Identification Number C <b>Transaction ID : SB21B.26290</b> Amount of Each Disbursement this Period 3.60
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement Domain Hosting fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dotster Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address PO Box 821066		FEC Identification Number C <b>Transaction ID : SB21B.26291</b> Amount of Each Disbursement this Period 11.49
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement Domain Hosting fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Dotster Inc.</b>		Date of Disbursement MM / DD / YYYY 08 / 23 / 2016
Mailing Address PO Box 821066		FEC Identification Number C <b>Transaction ID : SB21B.26292</b> Amount of Each Disbursement this Period 17.49
City Vancouver	State WA	
Zip Code 98682	Purpose of Disbursement Domain Hosting fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	32.58
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Dotster Inc.**

Mailing Address PO Box 821066

City Vancouver State WA Zip Code 98682

Purpose of Disbursement  
Domain Hosting fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26293  
Amount of Each Disbursement this Period  
17.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook Inc.**

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement  
Online advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 01 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26294  
Amount of Each Disbursement this Period  
7.22

Memo Item

Full Name (Last, First, Middle Initial)

**C. Facebook Inc.**

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement  
online advertising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 01 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26502  
Amount of Each Disbursement this Period  
757.01

Memo Item

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

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

781.72

**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"/> 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)  
**Americans for Legal Immigration PAC**

**A. Facebook Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 156 University Ave.

City Palo Alto State CA Zip Code 94301-1605

Purpose of Disbursement online advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26503

Amount of Each Disbursement this Period: 24.83

Memo Item

**B. Hostmonster**

Full Name (Last, First, Middle Initial)

Mailing Address 1958 South 950 East

City Provo State UT Zip Code 84606

Purpose of Disbursement Website hosting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26298

Amount of Each Disbursement this Period: 299.88

Memo Item

**C. Inetservices LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 841 Worcester Road #218

City Natick State MA Zip Code 01760

Purpose of Disbursement Website hosting services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 11 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26301

Amount of Each Disbursement this Period: 369.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 693.71

**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"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Inetservices LLC**

Mailing Address 841 Worcester Road  
#218

City Natick State MA Zip Code 01760

Purpose of Disbursement  
Website hosting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26302**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Inetservices LLC**

Mailing Address 841 Worcester Road  
#218

City Natick State MA Zip Code 01760

Purpose of Disbursement  
Website hosting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26303**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Leancoder LLC**

Mailing Address 1900 Sun Valley Ln

City Fort Mill State SC Zip Code 29715

Purpose of Disbursement  
Server Administration

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26271**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Leancoder LLC**

Mailing Address 1900 Sun Valley Ln

City Fort Mill State SC Zip Code 29715

Purpose of Disbursement  
Server Administration

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.26269**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Leancoder LLC**

Mailing Address 1900 Sun Valley Ln

City Fort Mill State SC Zip Code 29715

Purpose of Disbursement  
Server Administration

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.26271**  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MailChimp**

Mailing Address 512 Means St.  
Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
**Transaction ID : SB21B.26304**  
Amount of Each Disbursement this Period  
67.50

Memo Item

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

567.50

**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"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. MailChimp**

Mailing Address 512 Means St.  
Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26305**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MailChimp**

Mailing Address 512 Means St.  
Suite 404

City Atlanta State GA Zip Code 30318

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26305**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Moonray Web Design**

Mailing Address 543 Cox Rd  
Suite B

City Gastonia State NC Zip Code 28054

Purpose of Disbursement  
Website Maintenance and development

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.26305**  
Amount of Each Disbursement this Period

Memo Item

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 81						
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial) <b>A. Moonray Web Design</b>		Date of Disbursement MM / DD / YYYY 08 / 08 / 2016	
Mailing Address 543 Cox Rd Suite B		FEC Identification Number <b>C</b>	
City Gastonia	State NC	Zip Code 28054	<b>Transaction ID : SB21B.26307</b>
Purpose of Disbursement Website Maintenance and development		Category/ Type	Amount of Each Disbursement this Period 55.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Moonray Web Design</b>		Date of Disbursement MM / DD / YYYY 09 / 16 / 2016	
Mailing Address 543 Cox Rd Suite B		FEC Identification Number <b>C</b>	
City Gastonia	State NC	Zip Code 28054	<b>Transaction ID : SB21B.26308</b>
Purpose of Disbursement Website Maintenance and development		Category/ Type	Amount of Each Disbursement this Period 265.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Rackspace</b>		Date of Disbursement MM / DD / YYYY 07 / 29 / 2016	
Mailing Address 1 Fanatical Place City of Windcrest		FEC Identification Number <b>C</b>	
City San Antonio	State TX	Zip Code 78218	<b>Transaction ID : SB21B.26311</b>
Purpose of Disbursement Email service		Category/ Type	Amount of Each Disbursement this Period 16.00
Candidate Name			<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	336.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Rackspace**

Mailing Address 1 Fanatical Place  
City of Windcrest

City San Antonio State TX Zip Code 78218

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26311  
Amount of Each Disbursement this Period  
16.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Rackspace**

Mailing Address 1 Fanatical Place  
City of Windcrest

City San Antonio State TX Zip Code 78218

Purpose of Disbursement  
Email service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26312  
Amount of Each Disbursement this Period  
16.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Time Warner Cable**

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 18 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26313  
Amount of Each Disbursement this Period  
59.98

Memo Item

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

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

91.98

**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"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 17 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26314  
Amount of Each Disbursement this Period  
59.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. Time Warner Cable**

Mailing Address 2505 Atlantic Ave. Ste. 101

City Raleigh State NC Zip Code 27604

Purpose of Disbursement  
Internet service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 19 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26315  
Amount of Each Disbursement this Period  
59.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. Vonage**

Mailing Address 23 Main St

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement  
Phone service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26316  
Amount of Each Disbursement this Period  
37.28

Memo Item

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

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

157.26

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Vonage**

Mailing Address 23 Main St

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement  
Phone service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 08 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26317  
Amount of Each Disbursement this Period  
49.32

Memo Item

Full Name (Last, First, Middle Initial)

**B. Vonage**

Mailing Address 23 Main St

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement  
Phone service

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26318  
Amount of Each Disbursement this Period  
49.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. Westmoreland Printers**

Mailing Address 2020 E Dixon Blvd

City Shelby State NC Zip Code 28150

Purpose of Disbursement  
Letterhead and printing services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 30 / 2016

FEC Identification Number

C  
Transaction ID : SB21B.26315  
Amount of Each Disbursement this Period  
2056.91

Memo Item

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

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

2155.55

**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"/> 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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial) <b>A. William Gheen</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016	
Mailing Address PO Box 30966		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26262</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Raleigh	State NC	Zip Code 27622	Category/ Type [ ]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. William Gheen</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2016	
Mailing Address PO Box 30966		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26267</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Raleigh	State NC	Zip Code 27622	Category/ Type [ ]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. William Gheen</b>		Date of Disbursement MM / DD / YYYY 07 / 22 / 2016	
Mailing Address PO Box 30966		FEC Identification Number C [ ] <b>Transaction ID : SB21B.26263</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Raleigh	State NC	Zip Code 27622	Category/ Type [ ]
Purpose of Disbursement Salary		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)  
**Americans for Legal Immigration PAC**

**A. William Gheen**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 22 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26264

Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. William Gheen**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 16 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26265

Amount of Each Disbursement this Period: 2000.00

Memo Item

**C. William Gheen**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement Salary

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 21 / 2016

FEC Identification Number: C

Transaction ID : SB21B.26266

Amount of Each Disbursement this Period: 2000.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	21348.47

**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Americans for Legal Immigration PAC** Transaction ID : **SC/10.25815**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Americans for Legal Immigration PAC			<input checked="" type="checkbox"/> <b>N</b> <input type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 30966				
City Raleigh	State NC	ZIP Code 27622		

Original Amount of Loan 3100.00	Cumulative Payment To Date 3487.50	Balance Outstanding at Close of This Period -387.50
------------------------------------	---------------------------------------	--

**TERMS**

Date Incurred MM / DD / YYYY 12 / 07 / 2015	Date Due MM / DD / YYYY 6/7/2016	Interest Rate 4.25 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	--	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	-387.50
<b>TOTALS</b> This Period (last page in this line only).....	▶	-387.50

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00405878
---	--

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Callfire</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1838 Corinth Ave #3	Amount <input type="text"/>
City Los Angeles State CA Zip Code 90025	Transaction ID : <b>SE.26481</b>
Purpose of Expenditure Phone Bank services Ind. Exp. Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 900.00	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 <b>Callfire</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1838 Corinth Ave #3	Amount <input type="text"/>
City Los Angeles State CA Zip Code 90025	Transaction ID : <b>SE.26482</b>
Purpose of Expenditure Phone Bank services Ind. Exp. Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1200.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 700.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> 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.

Cotter, Beverly, , ,

*[Electronically Filed]*

Date

/  /

Signature



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Americans for Legal Immigration PAC
FEC IDENTIFICATION NUMBER
C C00405878

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

Full Name of Payee Callfire
Mailing Address 1838 Corinth Ave #3
City Los Angeles State CA Zip Code 90025
Purpose of Expenditure Phone Bank Services Ind. Exp.
Category/Type 004
Name of Federal Candidate: Ryan, Paul, ,
Office Sought: House District: 01 State: WI
Calendar Year-To-Date Per Election for Office Sought 1312.15
Disbursement For: Primary General 2016

Full Name of Payee Callfire
Mailing Address 1838 Corinth Ave #3
City Los Angeles State CA Zip Code 90025
Purpose of Expenditure Phone Bank Services Ind. Exp.
Category/Type 004
Name of Federal Candidate: Ryan, Paul, ,
Office Sought: House District: 01 State: WI
Calendar Year-To-Date Per Election for Office Sought 1412.15
Disbursement For: Primary General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 200.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) 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.

Cotter, Beverly, ,

[Electronically Filed]

Date

10 / 15 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 15px; height: 15px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00405878</span> </div>
---	---

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Callfire</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>
Mailing Address <b>1838 Corinth Ave #3</b>	Amount <span style="border: 1px solid black; padding: 2px;">100.00</span>
City <b>Los Angeles</b> State <b>CA</b> Zip Code <b>90025</b>	<b>Transaction ID : SE.26486</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>
Purpose of Expenditure <b>Phone Bank Services Ind. Exp.</b>	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <b>Ryan, Paul, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2012.15</span>	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 <b>Callfire</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>
Mailing Address <b>1838 Corinth Ave #3</b>	Amount <span style="border: 1px solid black; padding: 2px;">100.00</span>
City <b>Los Angeles</b> State <b>CA</b> Zip Code <b>90025</b>	<b>Transaction ID : SE.26487</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>
Purpose of Expenditure <b>Phone Bank Services Ind. Exp.</b>	Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>
Name of Federal Candidate: <b>Ryan, Paul, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2112.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">200.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Signature Cotter, Beverly, , ,    **[Electronically Filed]**    Date 10 / 15 / 2016

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 10px;">C00405878</span> </div>
---	---

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Callfire</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>						
Mailing Address <b>1838 Corinth Ave #3</b>	Amount <span style="border: 1px solid black; padding: 2px;">100.00</span> <b>Transaction ID : SE.26488</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2016</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90025</td> </tr> </table>		City	State	Zip Code	Los Angeles	CA	90025
City		State	Zip Code				
Los Angeles	CA	90025					
Purpose of Expenditure Phone Bank Services Ind. Exp.    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Ryan, Paul, , ,	Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>WI</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2212.15</span>	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 <b>Callfire</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">08 / 28 / 2016</span>						
Mailing Address <b>1838 Corinth Ave #3</b>	Amount <span style="border: 1px solid black; padding: 2px;">300.00</span> <b>Transaction ID : SE.26489</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">08 / 28 / 2016</span>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Los Angeles</td> <td>CA</td> <td>90025</td> </tr> </table>		City	State	Zip Code	Los Angeles	CA	90025
City		State	Zip Code				
Los Angeles	CA	90025					
Purpose of Expenditure Phone Bank Services Ind. Exp.    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose McCain, John, , ,	Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate    State: <u>AZ</u>						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">300.00</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">400.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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

*Cotter, Beverly, , ,*

**[Electronically Filed]**

Date

10 / 15 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00405878
---	--

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Callfire</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1838 Corinth Ave #3	Amount <input type="text"/>
City Los Angeles State CA Zip Code 90025	Transaction ID : <b>SE.26491</b>
Purpose of Expenditure Phone Bank Services Ind. Exp. Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: McCain, John, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 600.00	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 <b>Callfire</b>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1838 Corinth Ave #3	Amount <input type="text"/>
City Los Angeles State CA Zip Code 90025	Transaction ID : <b>SE.26493</b>
Purpose of Expenditure Phone Bank Services Ind. Exp. Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: McCain, John, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>AZ</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1000.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 700.00
(a) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input type="text"/>
(a) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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Cotter, Beverly, , ,

*[Electronically Filed]*

Date

/  /

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 2px;">C</span> C00405878                 </div>
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Check if  24-hour report  48-hour report ➤     
 New report      Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item <b>Campaign Marketing Strategies, Inc</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 30 / 2016
Mailing Address 3420 Wilson Blvd, Ste 202,			Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">500.00</span>
City Arlington	State VA	Zip Code 22201	
Purpose of Expenditure Marketing call list		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.26479</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 18 / 2016
Name of Federal Candidate: Ryan, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">500.00</span>	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 <b>Facebook Inc.</b>			Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 31 / 2016
Mailing Address 156 University Ave.			Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">12.15</span>
City Palo Alto	State CA	Zip Code 94301-1605	
Purpose of Expenditure Online advertising		Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Transaction ID : <b>SE.26494</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 07 / 31 / 2016
Name of Federal Candidate: Ryan, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought		<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1212.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">512.15</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </span>

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

Cotter, Beverly, , ,

*[Electronically Filed]*

Date

MM / DD / YYYY  
10 / 15 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; padding: 0 2px;">C</span> C00405878                 </div>
---	---

Check if  24-hour report  48-hour report ➤     
 New report      Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 01 / 2016						
Mailing Address 156 University Ave.	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">100.00</span> <b>Transaction ID : SE.26496</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 09 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94301-1605</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94301-1605
City		State	Zip Code				
Palo Alto	CA	94301-1605					
Purpose of Expenditure Online Advertising      Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House      District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate      State: WI						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">2312.15</span>	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 <b>Facebook Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 08 / 02 / 2016						
Mailing Address 156 University Ave.	Amount <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">100.00</span> <b>Transaction ID : SE.26497</b> Date of Disbursement or Obligation <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 09 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City</td> <td style="width:33%; border-bottom: 1px solid black;">State</td> <td style="width:33%; border-bottom: 1px solid black;">Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94301-1605</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94301-1605
City		State	Zip Code				
Palo Alto	CA	94301-1605					
Purpose of Expenditure Online advertising      Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>							
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House      District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate      State: WI						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">2412.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">200.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </span>

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Cotter, Beverly, , ,

**[Electronically Filed]**

Date

MM / DD / YYYY  
10 / 15 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black; padding: 0 2px;">C</span> C00405878                 </div>
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Check if  24-hour report  48-hour report ➤  New report  Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid gray; padding: 2px;">MM / DD / YYYY</span> 08 / 03 / 2016						
Mailing Address 156 University Ave.	Amount <span style="border: 1px solid gray; padding: 2px;">100.00</span> <b>Transaction ID : SE.26498</b> Date of Disbursement or Obligation <span style="border: 1px solid gray; padding: 2px;">MM / DD / YYYY</span> 09 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94301-1605</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94301-1605
City		State	Zip Code				
Palo Alto	CA	94301-1605					
Purpose of Expenditure online advertising							
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: WI						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid gray; padding: 2px;">2512.15</span>	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 <b>Facebook Inc.</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid gray; padding: 2px;">MM / DD / YYYY</span> 08 / 04 / 2016						
Mailing Address 156 University Ave.	Amount <span style="border: 1px solid gray; padding: 2px;">100.00</span> <b>Transaction ID : SE.26499</b> Date of Disbursement or Obligation <span style="border: 1px solid gray; padding: 2px;">MM / DD / YYYY</span> 09 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Palo Alto</td> <td>CA</td> <td>94301-1605</td> </tr> </table>		City	State	Zip Code	Palo Alto	CA	94301-1605
City		State	Zip Code				
Palo Alto	CA	94301-1605					
Purpose of Expenditure online advertising							
Name of Federal Candidate: Ryan, Paul, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 01 State: WI						
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid gray; padding: 2px;">2612.15</span>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid gray; padding: 2px;">200.00</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid gray; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid gray; padding: 2px;"> </span>

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

Cotter, Beverly, , ,

*[Electronically Filed]*

Date MM / DD / YYYY  
10 / 15 / 2016

Signature

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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00405878
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>Facebook Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>156 University Ave.</b>	Amount <input type="text"/>
City <b>Palo Alto</b> State <b>CA</b> Zip Code <b>94301-1605</b>	
Purpose of Expenditure <b>online advertising</b> Category/Type <input type="text"/>	<b>Transaction ID : SE.26500</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>Ryan, Paul, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>WI</b>
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) ▶

Full Name of Payee <b>Facebook Inc.</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>156 University Ave.</b>	Amount <input type="text"/>
City <b>Palo Alto</b> State <b>CA</b> Zip Code <b>94301-1605</b>	
Purpose of Expenditure <b>online advertising</b> Category/Type <input type="text"/>	<b>Transaction ID : SE.26501</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>McCain, John, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>AZ</b>
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) ▶

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

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Cotter, Beverly, , , [Electronically Filed] Date  /  /

Signature



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

NAME OF COMMITTEE (In Full) <b>Americans for Legal Immigration PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00405878
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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 <b>News/Talk 1130 WISN IHeartMedia</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address <b>12100 W. Howard Ave.</b>		Amount <input type="text"/>	
City <b>Greenfield</b>	State <b>WI</b>	Zip Code <b>53228</b>	<b>Transaction ID : SE.26480</b>
Purpose of Expenditure <b>Radio advertising</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <b>Ryan, Paul, , ,</b>		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>WI</b>
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) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation
Purpose of Expenditure		Category/Type	<input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate:		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	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) ▶	

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

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*Cotter, Beverly, , ,* [Electronically Filed] Date  /  /

Signature