

FEC FORM 3P **REPORT OF RECEIPTS AND DISBURSEMENTS**
 BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

1. NAME OF COMMITTEE (in full, type or print) Example: If typing, type over the lines. 12FE4M5

LINDSEY GRAHAM 2016

ADDRESS (number and street) PO BOX 2732

Check if different than previously reported. (ACC)

Columbia SC 29202

CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00578757 3. THIS REPORT IS FOR Primary or General

4. TYPE OF REPORT (Choose One) Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

- April 15 (Q1) October 15 (Q3) Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11)
July 15 (Q2) January 31 Year-End Report (YE) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12)
Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

Thirtieth day report following the General Election on Twelfth day report preceding election on in the State of

Is this Report an Amendment? yes no

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer THAD H WESTBROOK

Signature of Treasurer THAD H WESTBROOK [Electronically Filed] Date 09 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. All previous versions of this form are obsolete and should no longer be used.

Table with 10 columns, first column labeled 'Office Use Only'

Write or Type Committee Name

LINDSEY GRAHAM 2016

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

SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	<input type="text" value="40304.61"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3)	<input type="text" value="52303.38"/>
8. SUBTOTAL (Lines 6 and 7)	<input type="text" value="92607.99"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2)	<input type="text" value="15952.21"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="76655.78"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="50040.70"/>
13. EXPENDITURES SUBJECT TO LIMITATION	<input type="text" value="0.00"/>

NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2)	<input type="text" value="3529395.76"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="5436470.30"/>

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

LINDSEY GRAHAM 2016

Report Covering the Period: From:

MM / DD / YYYY
06 / 01 / 2016

To:

MM / DD / YYYY
06 / 30 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized	49400.00	3491056.72
(ii) unitemized	100.00	250380.44
(iii) Total contributions	49500.00	3741437.16
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	71750.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d))	49500.00	3813187.16
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	1975000.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate	0.00	0.00
(b) Other Loans	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b))	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating	2803.38	35792.38
(b) Fundraising	0.00	0.00
(c) Legal and Accounting	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c))	2803.38	35792.38
21. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	8730.32
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21)	52303.38	5832709.86

DETAILED SUMMARY PAGE

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

LINDSEY GRAHAM 2016

Report Covering the Period: From:

MM / DD / YYYY
06 / 01 / 2016

To:

MM / DD / YYYY
06 / 30 / 2016

II. DISBURSEMENTS

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

23. OPERATING EXPENDITURES.....	15952.21	5472262.68
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
25. FUNDRAISING DISBURSEMENTS	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	282791.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees	0.00	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c))	0.00	283791.40
29. OTHER DISBURSEMENTS	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)	15952.21	5756054.08

**III. CONTRIBUTED ITEMS
(Stock, Art Objects, Etc.)**

31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)	0.00	
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FEC FORM 3P,
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

**ALLOCATION OF PRIMARY EXPENDITURES
BY STATE FOR
A PRESIDENTIAL CANDIDATE**
(Used Only by Primary Committees Receiving
or Expecting To Receive Federal Funds)

Office Use Only

1. NAME OF COMMITTEE (in full, type or print)

2. FEC IDENTIFICATION NUMBER

C C00578757

LINDSEY GRAHAM 2016

ADDRESS (number and street)

PO BOX 2732

Columbia

CITY

SC

STATE

29202

ZIP CODE

3. NAME OF CANDIDATE

ALLOCATION BY STATE

STATE	ALLOCATION This Period	TOTAL ALLOCATION To Date
Alabama	0.00	0.00
Alaska	0.00	0.00
Arizona	0.00	0.00
Arkansas	0.00	0.00
California	0.00	0.00
Colorado	0.00	0.00
Connecticut	0.00	0.00
Delaware	0.00	0.00
District of Columbia	0.00	0.00
Florida	0.00	0.00
Georgia	0.00	0.00
Hawaii	0.00	0.00
Idaho	0.00	0.00
Illinois	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Indiana	0.00	0.00
Iowa	0.00	0.00
Kansas	0.00	0.00
Kentucky	0.00	0.00
Louisiana	0.00	0.00
Maine	0.00	0.00
Maryland	0.00	0.00
Massachusetts	0.00	0.00
Michigan	0.00	0.00
Minnesota	0.00	0.00
Mississippi	0.00	0.00
Missouri	0.00	0.00
Montana	0.00	0.00
Nebraska	0.00	0.00
Nevada	0.00	0.00
New Hampshire	0.00	0.00
New Jersey	0.00	0.00
New Mexico	0.00	0.00
New York	0.00	0.00
North Carolina	0.00	0.00
North Dakota	0.00	0.00
Ohio	0.00	0.00
Oklahoma	0.00	0.00
Oregon	0.00	0.00
Pennsylvania	0.00	0.00

<i>STATE</i>	<i>ALLOCATION This Period</i>	<i>TOTAL ALLOCATION To Date</i>
Rhode Island	0.00	0.00
South Carolina	0.00	0.00
South Dakota	0.00	0.00
Tennessee	0.00	0.00
Texas	0.00	0.00
Utah	0.00	0.00
Vermont	0.00	0.00
Virginia	0.00	0.00
Washington	0.00	0.00
West Virginia	0.00	0.00
Wisconsin	0.00	0.00
Wyoming	0.00	0.00
Puerto Rico	0.00	0.00
Guam	0.00	0.00
Virgin Islands	0.00	0.00
TOTALS	0.00	0.00

**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)
LINDSEY GRAHAM 2016

A. Full Name (Last, First, Middle Initial)
ZEYNEP GUZEL

Mailing Address **3542 STONEGATE DR.**

City **CENTER VALLEY** State **PA** Zip Code **18034-8120**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **2700.00**

Transaction ID : SA17A.77721

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

2700.00

Memo Item
DEBT RETIREMENT

B. Full Name (Last, First, Middle Initial)
MR. THOMAS Q. KEEFE JR.

Mailing Address **6 TIMBER WATER CT**

City **BELLEVILLE** State **IL** Zip Code **62226-2490**

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

Name of Employer **KEEFE, KEEFE & UNSELL, PC** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Transaction ID : SA17A.77728

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

Memo Item
DEBT RETIREMENT

C. Full Name (Last, First, Middle Initial)
MR. JAY I. KISLAK

Mailing Address **7900 MIAMI LAKES DRIVE W.**

City **MIAMI LAKES** State **FL** Zip Code **33016-5816**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Transaction ID : SA17A.77700

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2016			

CONTRIBUTION

Amount of Each Receipt this Period

1000.00

Memo Item
DEBT RETIREMENT

Subtotal Of Receipts This Page (optional).....▶

4700.00

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

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**SCHEDULE A-P
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 16	<input type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LINDSEY GRAHAM 2016

A. Full Name (Last, First, Middle Initial)
BB&T

Mailing Address **2200 WILSON BLVD**

City **ARLINGTON** State **VA** Zip Code **22201**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
254.26

Transaction ID : SA8877899

Date of Receipt

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

VENDOR REFUND - BANK CHARGES

Amount of Each Receipt this Period
254.26

Memo Item

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

Mailing Address **2632 MARINE WAY**

City **MOUNTAIN VIEW** State **CA** Zip Code **94043**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2549.12

Transaction ID : SA2340900

Date of Receipt

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

VENDOR REFUND - ACCOUNTING SOFTWARE

Amount of Each Receipt this Period
2549.12

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

Memo Item

Subtotal Of Receipts This Page (optional).....▶ **2803.38**

Total This Period (last page this line number only).....▶ **2803.38**

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<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)
LINDSEY GRAHAM 2016

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 01 / 2016
Mailing Address 200 VESEY STREET		Transaction ID : SB55
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD MERCHANT FEES	Category/ Type	Amount of Each Disbursement this Period 7.95
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. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 06 / 06 / 2016
Mailing Address 200 VESEY STREET		Transaction ID : SB55_B4344
City NEW YORK	State NY	
Purpose of Disbursement CREDIT CARD MERCHANT FEES	Category/ Type	Amount of Each Disbursement this Period 214.46
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) C. CMDI		Date of Disbursement MM / DD / YYYY 06 / 08 / 2016
Mailing Address 1593 SPRING HILL ROAD STE. 400		Transaction ID : SB2
City TYSONS CORNER	State VA	
Purpose of Disbursement DATA MANAGEMENT SERVICES	Category/ Type	Amount of Each Disbursement this Period 12660.97
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:		

Subtotal Of Receipts This Page (optional)..... 12883.38

Total This Period (last page this line number only).....

**SCHEDULE B-P
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27a
<input type="checkbox"/> 27b	<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)
LINDSEY GRAHAM 2016

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 06 / 23 / 2016
Mailing Address 1593 SPRING HILL ROAD STE. 400		Transaction ID : SB2_B333
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement CREDIT CARD MERCHANT FEES	Category/Type	Amount of Each Disbursement this Period 54.25
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. INTUIT		Date of Disbursement MM / DD / YYYY 06 / 22 / 2016
Mailing Address 2632 MARINE WAY		Transaction ID : SB9899
City MOUNTAIN VIEW	State CA Zip Code 94043	
Purpose of Disbursement ACCOUNTING SOFTWARE	Category/Type	Amount of Each Disbursement this Period 2997.58
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		
City	State Zip Code	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Subtotal Of Receipts This Page (optional)..... 3051.83

Total This Period (last page this line number only)..... 15935.21

SCHEDULE D-P
DEBTS AND OBLIGATIONS (Excluding Loans)

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: 11
 12

NAME OF COMMITTEE (In Full)
LINDSEY GRAHAM 2016

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FALLBROOK COMMUNICATIONS LLC

Nature of Debt (Purpose):
COMPLIANCE CONSULTING

Mailing Address **6400 FALLBROOK ROAD**

City State Zip Code
EDEN PRAIRIE MN 55344

Outstanding Balance Beginning This Period

Transaction ID : SD275663

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
NOVUS PUBLIC AFFAIRS

Nature of Debt (Purpose):
PUBLIC RELATIONS STRATEGY CONSULTING

Mailing Address **PO BOX 4187**

City State Zip Code
PORTSMOUTH NH 03802

Outstanding Balance Beginning This Period

Transaction ID : SD1

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RIGHTSIDE COMPLIANCE LLC

Nature of Debt (Purpose):
COMPLIANCE CONSULTING

Mailing Address **PO BOX 341027**

City State Zip Code
AUSTIN TX 78734

Outstanding Balance Beginning This Period

Transaction ID : SD33333

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

- 1) **SUBTOTALS** This Period This Page (optional)
- 2) **TOTALS** This Period (last page this line number only)
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only).....