

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

Building Owners and Managers Association International Political Action Committee

ADDRESS (number and street) 1101 15th St., NW
Suite 800
 Check if different than previously reported. (ACC) Washington DC 20005

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00106435 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|---|--------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11)
(Non-Election Year Only) |
| <input checked="" type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12)
(Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y 02 / 01 / 2016 through M M M / D D D / Y Y Y Y Y Y Y 02 / 29 / 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 Karen W Penafiel

Signature of Treasurer Karen W Penafiel [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y 03 / 18 / 2016

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Building Owners and Managers Association International Political Action Committee

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"/>		99021.92
(b) Cash on Hand at Beginning of Reporting Period.....	101141.83	
(c) Total Receipts (from Line 19)	6839.06	10121.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	107980.89	109142.95
7. Total Disbursements (from Line 31).....	3714.99	4877.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	104265.90	104265.90
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Building Owners and Managers Association International Political Action Committee

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).....	3775.00	4775.00
(ii) Unitemized	2902.00	3407.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6677.00	8182.00
(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)	6677.00	8182.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	162.06	1939.03
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))..... ▶	6839.06	10121.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6839.06	10121.03

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	189.99	352.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	189.99	352.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	3000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	1525.00	1525.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3714.99	4877.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3714.99	4877.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	6677.00	8182.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6677.00	8182.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	189.99	352.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	189.99	352.05

**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 13
<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

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)
Building Owners and Managers Association International Political Action Committee

A. Ms. Anne Miller Sparks
 Full Name (Last, First, Middle Initial)
 Mailing Address 1360 Brookside Dr
 City Danville State CA Zip Code 94526-5148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Next Play Consulting, LLC Occupation Asset Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 25 / 2016
Transaction ID : 7917278
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Ms. Joanna Carbone
 Full Name (Last, First, Middle Initial)
 Mailing Address 7240 Windy Preserve
 City Lake Worth State FL Zip Code 33467-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Soprema Inc. Occupation Property Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 12 / 2016
Transaction ID : 7945825
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Mr. Edmund J. Mazzei Sr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 15330 SW 115 Terrace
 City Miami State FL Zip Code 33196-5217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mazzei Realty Services Inc. Occupation Capt. USMC, Retired President/Broker,
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 12 / 2016
Transaction ID : 7945826
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<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)
Building Owners and Managers Association International Political Action Committee

A. Mr. Sherwood Johnston III
 Full Name (Last, First, Middle Initial)
 Mailing Address 7344 E Keim Dr
 City State Zip Code
 Scottsdale AZ 85250-5508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Virtuoso Real Estate Services, LLC President
 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
 02 / 12 / 2016
Transaction ID : 7945827
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Mr. Mark Dukes
 Full Name (Last, First, Middle Initial)
 Mailing Address 3950 Shackleford Road
 Suite 300
 City State Zip Code
 Duluth GA 30096-1860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Duke Realty VP, Asset Management & Customer Servic
 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
 02 / 12 / 2016
Transaction ID : 7945828
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Ms Elisabeth Hensley
 Full Name (Last, First, Middle Initial)
 Mailing Address 313 Plum Drive
 City State Zip Code
 Lakeway TX 78734-3848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Texas Medical Association Real Estate Executive
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 520.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 17 / 2016
Transaction ID : 7945855
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 13
	<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)
Building Owners and Managers Association International Political Action Committee

A. Mr. Henry H. Chamberlain
 Full Name (Last, First, Middle Initial)
 Mailing Address 5910 Calla Drive
 City McLean State VA Zip Code 22101-3307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BOMA International Occupation President & Chief Operating Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 02 / 2016
Transaction ID : 7945941
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Mr. Shane Baggett
 Full Name (Last, First, Middle Initial)
 Mailing Address 10026 Coppedge Lane
 City Dallas State TX Zip Code 75229-6106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Crescent Real Estate Equities Ltd. Occupation General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 02 / 2016
Transaction ID : 7945942
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Ms. Joanna Carbone
 Full Name (Last, First, Middle Initial)
 Mailing Address 7240 Windy Preserve
 City Lake Worth State FL Zip Code 33467-7242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Soprema Inc. Occupation Property Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 02 / 2016
Transaction ID : 7945945
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
<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)
Building Owners and Managers Association International Political Action Committee

A. Ms. Brenna S. Walraven
 Full Name (Last, First, Middle Initial)
 Mailing Address 9532 Zion Circle
 City Huntington Beach State CA Zip Code 92646-5363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Corporate Sustainability Strategies, I Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **525.00**

Date of Receipt **02 / 02 / 2016**
Transaction ID : 7945950
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. Mr. James Collins
 Full Name (Last, First, Middle Initial)
 Mailing Address 105 Lakeside Drive
 City Corte Madera State CA Zip Code 94925-1005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Shorenstein Realty Services, LP Occupation Real Estate Executive
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **250.00**

Date of Receipt **02 / 02 / 2016**
Transaction ID : 7945985
 Amount of Each Receipt this Period **250.00**
 Memo Item

C. Ms. Brenna S. Walraven
 Full Name (Last, First, Middle Initial)
 Mailing Address 9532 Zion Circle
 City Huntington Beach State CA Zip Code 92646-5363
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Corporate Sustainability Strategies, I Occupation President
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date **550.00**

Date of Receipt **02 / 18 / 2016**
Transaction ID : 7945991
 Amount of Each Receipt this Period **25.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	3775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 13
<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)
Building Owners and Managers Association International Political Action Committee

Full Name (Last, First, Middle Initial) A. BOMA International		Date of Receipt
Mailing Address 1101 15th Street, NW Suite 800		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2016"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 7946078
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="162.06"/>
Aggregate Year-to-Date ▼		<input type="checkbox"/> Memo Item
<input type="text" value="1939.03"/>		Bank Fees Jan

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Aggregate Year-to-Date ▼		
<input type="text"/>		

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
Aggregate Year-to-Date ▼		
<input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="162.06"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="162.06"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building Owners and Managers Association International Political Action Committee

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address P.O.Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fees

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 7946081

Amount of Each Disbursement this Period

Memo Item
Bank Fees

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address P.O.Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : 7946082

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building Owners and Managers Association International Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scott Peters For Congress

Mailing Address PO Box 75357

City Washington State DC Zip Code 20013

Purpose of Disbursement

011

Category/
Type

Candidate Name

Rep. Scott Peters

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: CA District: 52

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		12		2016

Transaction ID : 7946079

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

--

Memo Item

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

2000.00

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

2000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Building Owners and Managers Association International Political Action Committee

Full Name (Last, First, Middle Initial)

A. BOMA International

Mailing Address 1101 15th Street, NW
Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Misdeposited Funds

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : 7946080

Amount of Each Disbursement this Period

Memo Item
Misdeposited Funds

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Memo Item

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

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