

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

CONTINUING AMERICAS STRENGTH & SECURITY

ADDRESS (number and street) 8550 UNITED PLAZA STE 1001 BATON ROUGE LA 70809

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00480228

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 04 / 01 / 2015 through 06 / 30 / 2015

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 RALPH STEPHENS

Signature of Treasurer RALPH STEPHENS [Electronically Filed] Date 07 / 15 / 2015

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

Table with 10 columns and 1 row for Office Use Only.

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CONTINUING AMERICAS STRENGTH & SECURITY

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="2015"/>	<input type="text" value="16514.48"/>	<input type="text" value="16514.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26438.66"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="76850.00"/>	<input type="text" value="151218.20"/>
(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="103288.66"/>	<input type="text" value="167732.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="23150.38"/>	<input type="text" value="87594.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="80138.28"/>	<input type="text" value="80138.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

CONTINUING AMERICAS STRENGTH & SECURITY

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).....	16750.00	24250.00
(ii) Unitemized	600.00	600.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17350.00	24850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	59500.00	126000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	76850.00	150850.00
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	368.20
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	76850.00	151218.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	76850.00	151218.20

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	18150.38	64594.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18150.38	64594.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	23000.00
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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	23150.38	87594.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23150.38	87594.40

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)	76850.00	150850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	76850.00	150850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	18150.38	64594.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18150.38	64594.40

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 25
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. CHRIS BRENGARD
Full Name (Last, First, Middle Initial)

Mailing Address 2400 DALLAS PKWY
SUITE 350

City PLANO State TX Zip Code 75093

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

Name of Employer US Renal Care Inc. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2015

Transaction ID : SA11AI.4462

Amount of Each Receipt this Period
1500.00

B. JANET BRITTON
Full Name (Last, First, Middle Initial)

Mailing Address 2515 S. SAN FRANCISCO

City GONZALES State LA Zip Code 70737

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

Name of Employer EATEL Occupation DIRECTOR OF LEGAL & REGULATORY AFF,

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
04 / 20 / 2015

Transaction ID : SA11AI.4503

Amount of Each Receipt this Period
1000.00

C. Cherilyn T Cepriano
Full Name (Last, First, Middle Initial)

Mailing Address 2301 WOODLAND CROSSING DR
APT 203

City HERNDON State VA Zip Code 20171

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

Name of Employer KIDNEY CARE COUNCIL Occupation 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
04 / 01 / 2015

Transaction ID : SA11AI.4459

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2750.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. STEPHEN B CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 9273 LERWICK DR
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CGCN GROUP Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11AI.4457
 Amount of Each Receipt this Period
 500.00

B. SUSAN L DEL BENE
 Full Name (Last, First, Middle Initial)
 Mailing Address 7571 TROON CT
 City GILROY State CA Zip Code 95020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SATELLITE HEALTHCARE Occupation CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11AI.4458
 Amount of Each Receipt this Period
 500.00

C. SHKELZEN HOXHAJ
 Full Name (Last, First, Middle Initial)
 Mailing Address 4130 DRAKE ST
 City HOUSTON State TX Zip Code 77005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAYLOR COLLEGE OF MEDICINE Occupation CHIEF MD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2015
Transaction ID : SA11AI.4530
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. JOSEPH J KUCHINSKI
 Full Name (Last, First, Middle Initial)
 Mailing Address 32 WOODLAND AVE
 City MOUNTAIN LAKES State NJ Zip Code 07046
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EMERGENCY MEDICINE PHYSICIANS Occupation FIREFIGHTER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 12 / 2015
Transaction ID : SA11AI.4532
 Amount of Each Receipt this Period 250.00

B. ROBERT LEFTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 5528 WEATHERBY
 City PLANO State TX Zip Code 75093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SEMPER CARE Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 04 / 06 / 2015
Transaction ID : SA11AI.4479
 Amount of Each Receipt this Period 750.00

C. PAUL LEXALT
 Full Name (Last, First, Middle Initial)
 Mailing Address 750 9TH ST NW #750
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PAUL LEXALT GROUP Occupation SELF-EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 01 / 2015
Transaction ID : SA11AI.4676
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
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 25
<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)
CONTINUING AMERICAS STRENGTH & SECURITY

A. BRADLEY C MITTENDORF
 Full Name (Last, First, Middle Initial)
 Mailing Address 543 SPANISH TOWN RD
 City BATON ROUGE State LA Zip Code 70802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOUTHERN STRATEGY GROUP Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11AI.4505
 Amount of Each Receipt this Period
 1000.00

B. MARK PHARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 101 BONNER DR
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GJTBS, APLC Occupation MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11AI.4499
 Amount of Each Receipt this Period
 1000.00

C. STEPHEN M PIRRI
 Full Name (Last, First, Middle Initial)
 Mailing Address 412 HECTOR AVE
 City METAIRIE State LA Zip Code 70005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US RENAL CARE Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11AI.4461
 Amount of Each Receipt this Period
 2000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)
A. MARK RICE

Mailing Address 409 E HONORS PT CT

City State Zip Code
SLIDELL LA 70458

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

Name of Employer Occupation
OCHSNER CLINIC FOUNDATION MD

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
 06 / 12 / 2015
Transaction ID : SA11AI.4538

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. CONRAD SCHATTE

Mailing Address 2200 S BUCHANAN ST

City State Zip Code
ARLINGTON VA 22206

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

Name of Employer Occupation
ENTERGY CORPORATION DIRECTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11AI.4482

Amount of Each Receipt this Period
500.00

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

Mailing Address 331 WHATWORTH WAY

City State Zip Code
NASHVILLE TN 37205

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

Name of Employer Occupation
DSI RENAL CFO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11AI.4460

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. RICHARD ZUSCHLAG
 Full Name (Last, First, Middle Initial)
 Mailing Address 108 ASTORIA LOOP
 City LAFAYETTE State LA Zip Code 70508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ACADIAN AMBULANCE SERVICE Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11AI.4486
 Amount of Each Receipt this Period
 5000.00

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	16750.00

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

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

FOR LINE NUMBER: PAGE 12 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. ABBVIE POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N. WAUKEGAN ROAD
 City NORTH CHICAGO State IL Zip Code 60064
 FEC ID number of contributing federal political committee. **C** C00536573
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11C.4509
 Amount of Each Receipt this Period
 1500.00

B. ACADIAN AMBULANCE SERVICE INC EMPLOYEE FEDERAL POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 98000
 City LAFAYETTE State LA Zip Code 70509
 FEC ID number of contributing federal political committee. **C** C00335570
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11C.4490
 Amount of Each Receipt this Period
 5000.00

C. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE (SKINPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1445 NEW YORK AVENUE NW
 STE 800
 City WASHINGTON State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C** C00359539
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11C.4580
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 9000.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)
A. AMERICAN COMMERCIAL LINES INC. PAC

Mailing Address 1701 EAST MARKET STREET

City State Zip Code
JEFFERSONVILLE IN 47130

FEC ID number of contributing federal political committee. **C** C00418269

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 13 / 2015
Transaction ID : SA11C.4492

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. BOEHRINGER INGELHEIM USA CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 900 RIDGEBURY ROAD

City State Zip Code
RIDGEFIELD CT 06877

FEC ID number of contributing federal political committee. **C** C00420398

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 25 / 2015
Transaction ID : SA11C.4542

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
C. CHICAGO BRIDGE & IRON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1050 K STREET, NW
SUITE 620

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00104885

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 11 / 2015
Transaction ID : SA11C.4511

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. COX ENTERPRISES PAC (COXPAC) INC.
 Full Name (Last, First, Middle Initial)
 Mailing Address 975 F STREET, NW SUITE 300
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00477653
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11C.4513
 Amount of Each Receipt this Period
 5000.00

B. DAVITA HEALTHCARE PARTNERS, INC. POLITICAL ACTION COMMITTEE (DAPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 32275 32ND AVENUE, S.
 City FEDERAL WAY State WA Zip Code 98001
 FEC ID number of contributing federal political committee. **C** C00340943
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2015
Transaction ID : SA11C.4477
 Amount of Each Receipt this Period
 5000.00

C. DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION
 Full Name (Last, First, Middle Initial)
 Mailing Address 8400 WESTPARK DRIVE
 City MCLEAN State VA Zip Code 22102
 FEC ID number of contributing federal political committee. **C** C00040998
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2015
Transaction ID : SA11C.4496
 Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 15 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)
A. FRESENIUS MEDICAL CARE NORTH AMERICA PAC

Mailing Address 801 PENNSYLVANIA AVENUE, NW
SUITE 255

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11C.4475

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. IKARIA POLITICAL ACTION COMMITTEE -AKA- IKAREPAC

Mailing Address 444 NORTH CAPITOL ST NW SUITE 830

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00463539

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11C.4474

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
C. IKARIA POLITICAL ACTION COMMITTEE -AKA- IKAREPAC

Mailing Address 444 NORTH CAPITOL ST NW SUITE 830

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00463539

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11C.4498

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 9000.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)
A. INTERNATIONAL ORGANIZATION OF MASTER, MATES, & PILOTS

Mailing Address 700 MARITIME BOULEVARD
SUITE B

City LINTHICIUM HEIGHTS State MD Zip Code 21090

FEC ID number of contributing federal political committee. **C** C00073056

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2015
Transaction ID : SA11C.4639

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. INTERNATIONAL SHIPHOLDING CORP POLITICAL ACTION COMMITTEE

Mailing Address 11 N. WATER STREET, SUITE 18290

City MOBILE State AL Zip Code 36602

FEC ID number of contributing federal political committee. **C** C00327122

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11C.4468

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
C. LOUIS DREYFUS COMMODITIES LLC POLITICAL ACTION COMMITTEE

Mailing Address 40 DANBURY ROAD

City WILTON State CT Zip Code 06897

FEC ID number of contributing federal political committee. **C** C00492363

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2015
Transaction ID : SA11C.4501

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 4500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 601 PENNSYLVANIA AVE., NW
NORTH BUILDING, SUITE 1200

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2015

Transaction ID : SA11C.4544

Amount of Each Receipt this Period
1000.00

B. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING	State TX	Zip Code 75038
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2015

Transaction ID : SA11C.4515

Amount of Each Receipt this Period
5000.00

C. NOVARTIS CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 701 PENNSYLVANIA AVE. NW SUITE 725

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2015

Transaction ID : SA11C.4517

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 18 OF 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. NUCOR CORPORATION POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1915 REXFORD ROAD
 City CHARLOTTE State NC Zip Code 28211
 FEC ID number of contributing federal political committee. **C** C00379628
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11C.4540
 Amount of Each Receipt this Period
 1000.00

B. POWER POLITICAL ACTION COMMITTEE OF ENERGY FUTURE HOLDINGS CORP.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1601 BRYAN ST.
 City DALLAS State TX Zip Code 75201
 FEC ID number of contributing federal political committee. **C** C00255950
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2015
Transaction ID : SA11C.4464
 Amount of Each Receipt this Period
 2000.00

C. PRAXAIR, INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 39 OLD RIDGEBURY ROAD
 PO BOX 2958
 City DANBURY State CT Zip Code 06813
 FEC ID number of contributing federal political committee. **C** C00283440
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2015
Transaction ID : SA11C.4519
 Amount of Each Receipt this Period
 5000.00

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 19 OF 25
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address ONE VALERO WAY
City SAN ANTONIO State TX Zip Code 78249
FEC ID number of contributing federal political committee. **C** C00109546
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 01 / 2015
Transaction ID : SA11C.4469
Amount of Each Receipt this Period
5000.00

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	59500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement
CREDIT CARD INTEREST AND FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2015

Transaction ID : SB21B.4623

Amount of Each Disbursement this Period

35.00

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement
CREDIT CARD INTEREST AND FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2015

Transaction ID : SB21B.4624

Amount of Each Disbursement this Period

67.46

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2015

Transaction ID : SB21B.4667

Amount of Each Disbursement this Period

163.60

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

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

266.06

**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)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. HILTON HOTEL NEW ORLEANS

Mailing Address 333 SAINT CHARLES AVE

City NEW ORLEANS State LA Zip Code 70130

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2015

Transaction ID : **SB21B.4648**

Amount of Each Disbursement this Period

313.17

Full Name (Last, First, Middle Initial)

B. LA GOVERNOR'S PRAYER BREAKFAST STEERING COMMITTEE

Mailing Address 2561 CITIPLACE CT
STE 750-133

City BATON ROUGE State LA Zip Code 70808

Purpose of Disbursement
LUNCHEON

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2015

Transaction ID : **SB21B.4567**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. LOUISIANA FEDERATION OF COLLEGE REPUBLICANS

Mailing Address 5411 NICHOLSON DRIVE
SUITE D

City BATON ROUGE State LA Zip Code 70820

Purpose of Disbursement
ANNUAL CONFERENCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2015

Transaction ID : **SB21B.4569**

Amount of Each Disbursement this Period

500.00

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

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

1413.17

**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)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. POSTLETHWAITE & NETTERVILLE APAC

Mailing Address 8550 UNITED PLAZA BLVD
SUITE 1001

City BATON ROUGE State LA Zip Code 70809

Purpose of Disbursement
ACCOUNTING AND COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	5

Transaction ID : **SB21B.4547**

Amount of Each Disbursement this Period

5	4	1	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. RUTH'S CHRIS STEAK HOUSE

Mailing Address 724 9TH ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
FOOD AND BEVERAGE FOR FUNDRAISING EVENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	5

Transaction ID : **SB21B.4594**

Amount of Each Disbursement this Period

1	7	3	2	4	4	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	5

Transaction ID : **SB21B.4424**

Amount of Each Disbursement this Period

3	1	7	3	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

7	4	5	9	7	4	0	0	0	0
---	---	---	---	---	---	---	---	---	---

7	4	5	9	7	4	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 12 / 2015

Transaction ID : SB21B.4527

Amount of Each Disbursement this Period

6405.51

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2015

Transaction ID : SB21B.4666

Amount of Each Disbursement this Period

201.50

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2015

Transaction ID : SB21B.4591

Amount of Each Disbursement this Period

481.10

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

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

7088.11

**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)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SB21B.4619

Amount of Each Disbursement this Period

340.20

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

340.20

16567.28

**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)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. FRIENDS OF PAT TOOMEY

Mailing Address 228 S. WASHINGTON ST., SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SB23.4553

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

5000.00

5000.00