



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2357.68"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="20026.78"/>	<input type="text" value="50489.49"/>
(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="22384.46"/>	<input type="text" value="51387.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="16885.83"/>	<input type="text" value="45888.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5498.63"/>	<input type="text" value="5498.63"/>
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="1255.49"/>	

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

**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).....	9174.03	21961.98
(ii) Unitemized .....	9509.75	25872.04
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18683.78	47834.02
(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) .....	18683.78	47834.02
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).....	358.22	358.22
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	984.78	2297.25
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))..... ▶	20026.78	50489.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	20026.78	50489.49

**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 .....	16885.83	44044.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	16885.83	44044.08
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) .....	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	1844.51
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)) ..	16885.83	45888.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16885.83	45888.59

**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) .....	18683.78	47834.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18683.78	47834.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	16885.83	44044.08
37. Offsets to Operating Expenditures (from Line 15, page 3).....	358.22	358.22
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	16527.61	43685.86

**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 58  
(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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Ricky Anderson**

Mailing Address 4321 Hamm Rd

City Barboursville	State VA	Zip Code 22923
-----------------------	-------------	-------------------

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

Name of Employer Northrop Grumman	Occupation Engineer
--------------------------------------	------------------------

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
05	/	10	/	2016

**Transaction ID : SA11AI.26044**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Ricky Anderson**

Mailing Address 4321 Hamm Rd

City Barboursville	State VA	Zip Code 22923
-----------------------	-------------	-------------------

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

Name of Employer Northrop Grumman	Occupation Engineer
--------------------------------------	------------------------

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
06	/	24	/	2016

**Transaction ID : SA11AI.26045**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Ricky Anderson**

Mailing Address 4321 Hamm Rd

City Barboursville	State VA	Zip Code 22923
-----------------------	-------------	-------------------

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

Name of Employer Northrop Grumman	Occupation Engineer
--------------------------------------	------------------------

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	/	30	/	2016

**Transaction ID : SA11AI.26046**

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: PAGE 7 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Donald Baer**

Mailing Address 50 Broad St.

City Groton State CT Zip Code 06340

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

Name of Employer Occupation  
Rugh Protective Agency Best Effort

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  
 06 / 30 / 2016  
**Transaction ID : SA11AI.26047**

Amount of Each Receipt this Period  
200.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Nancy Jo Baratti**

Mailing Address 3050 Nassau Drive

City Brookfield State WI Zip Code 53045

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

Name of Employer Occupation  
Self-Employed, Best Effort Self-Employed, Best Effort

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
510.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 10 / 2016  
**Transaction ID : SA11AI.26050**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**c. Nancy Jo Baratti**

Mailing Address 3050 Nassau Drive

City Brookfield State WI Zip Code 53045

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

Name of Employer Occupation  
Self-Employed, Best Effort Self-Employed, Best Effort

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
610.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 01 / 2016  
**Transaction ID : SA11AI.26048**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00

**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 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Nancy Jo Baratti**

Mailing Address 3050 Nassau Drive

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Self-Employed, Best Effort	Occupation Self-Employed, Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
710.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2016

**Transaction ID : SA11AI.26049**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Nancy Jo Baratti**

Mailing Address 3050 Nassau Drive

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Self-Employed, Best Effort	Occupation Self-Employed, Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
810.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	21	/	2016

**Transaction ID : SA11AI.26051**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Nancy Jo Baratti**

Mailing Address 3050 Nassau Drive

City Brookfield	State WI	Zip Code 53045
--------------------	-------------	-------------------

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

Name of Employer Self-Employed, Best Effort	Occupation Self-Employed, Best Effort
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
910.00

Date of Receipt  

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

**Transaction ID : SA11AI.26052**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

<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: PAGE 9 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2176.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2016  
**Transaction ID : SA11AI.26053**

Amount of Each Receipt this Period  
 90.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**B. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2267.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 11 / 2016  
**Transaction ID : SA11AI.26054**

Amount of Each Receipt this Period  
 91.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**C. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 2365.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2016  
**Transaction ID : SA11AI.26055**

Amount of Each Receipt this Period  
 98.00

Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 279.00

**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 58
	(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. Jo Ann Baughman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2455.00

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

**Transaction ID : SA11AI.26056**

Amount of Each Receipt this Period  
90.00

Memo Item  
Donation

**B. Jo Ann Baughman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2546.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 01 / 2016

**Transaction ID : SA11AI.26057**

Amount of Each Receipt this Period  
91.00

Memo Item  
Donation

**C. Jo Ann Baughman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2641.00

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

**Transaction ID : SA11AI.26058**

Amount of Each Receipt this Period  
95.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	276.00
<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 58
	<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. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2740.00**

Date of Receipt **05 / 09 / 2016**  
**Transaction ID : SA11AI.26059**  
 Amount of Each Receipt this Period **99.00**  
 Memo Item  
 Donation

**B. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2831.00**

Date of Receipt **05 / 11 / 2016**  
**Transaction ID : SA11AI.26060**  
 Amount of Each Receipt this Period **91.00**  
 Memo Item  
 Donation

**C. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2926.00**

Date of Receipt **05 / 15 / 2016**  
**Transaction ID : SA11AI.26061**  
 Amount of Each Receipt this Period **95.00**  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>285.00</b>
<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 12 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3024.00

Date of Receipt 05 / 18 / 2016  
**Transaction ID : SA11AI.26062**  
 Amount of Each Receipt this Period 98.00  
 Memo Item  
 Donation

**B. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3123.00

Date of Receipt 05 / 19 / 2016  
**Transaction ID : SA11AI.26063**  
 Amount of Each Receipt this Period 99.00  
 Memo Item  
 Donation

**C. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3216.00

Date of Receipt 05 / 23 / 2016  
**Transaction ID : SA11AI.26065**  
 Amount of Each Receipt this Period 93.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 290.00  
**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 13 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3311.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 25 / 2016  
**Transaction ID : SA11AI.26066**  
 Amount of Each Receipt this Period 95.00  
 Memo Item  
 Donation

**B. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3403.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2016  
**Transaction ID : SA11AI.26067**  
 Amount of Each Receipt this Period 92.00  
 Memo Item  
 Donation

**C. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3499.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : SA11AI.26068**  
 Amount of Each Receipt this Period 96.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 283.00  
**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 14 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3597.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 18 / 2016  
**Transaction ID : SA11AI.26070**

Amount of Each Receipt this Period  
98.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3688.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 21 / 2016  
**Transaction ID : SA11AI.26071**

Amount of Each Receipt this Period  
91.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Jo Ann Baughman**

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3780.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11AI.26072**

Amount of Each Receipt this Period  
92.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 281.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58
	<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. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3876.00**

Date of Receipt **06 / 26 / 2016**  
**Transaction ID : SA11AI.26073**  
 Amount of Each Receipt this Period **96.00**  
 Memo Item  
 Donation

**B. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3973.00**

Date of Receipt **06 / 27 / 2016**  
**Transaction ID : SA11AI.26074**  
 Amount of Each Receipt this Period **97.00**  
 Memo Item  
 Donation

**C. Jo Ann Baughman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 1269  
 City Philomath State OR Zip Code 97370  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **4072.00**

Date of Receipt **06 / 29 / 2016**  
**Transaction ID : SA11AI.26075**  
 Amount of Each Receipt this Period **99.00**  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>292.00</b>
<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 58
	<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. Jo Ann Baughman**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4162.00

Date of Receipt  
06 / 30 / 2016  
Transaction ID : SA11AI.26076

Amount of Each Receipt this Period  
90.00

Memo Item  
Donation

**B. Mary Beganyi**  
Full Name (Last, First, Middle Initial)

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 Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
06 / 03 / 2016  
Transaction ID : SA11AI.26077

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

**C. Mary Beganyi**  
Full Name (Last, First, Middle Initial)

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 Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
06 / 28 / 2016  
Transaction ID : SA11AI.26078

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 190.00

**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 17 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Margaret Caldwell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2975 Terrace Dr.  
 City Las Cruces State NM Zip Code 88011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 04 / 25 / 2016  
**Transaction ID : SA11AI.26079**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**B. Jerry Chapman**  
 Full Name (Last, First, Middle Initial)  
 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 RETired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 09 / 2016  
**Transaction ID : SA11AI.26080**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
 Donation

**c. Jerry Chapman**  
 Full Name (Last, First, Middle Initial)  
 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 RETired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 06 / 28 / 2016  
**Transaction ID : SA11AI.26081**  
 Amount of Each Receipt this Period 30.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1030.00  
**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 18 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Jason Cook**

Mailing Address 4171 Hi-Hill Dr

City State Zip Code  
Lapeer MI 48446

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

Name of Employer Occupation  
Best Effort Best Effort

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
222.35

Date of Receipt  
 /  /   
 04 / 11 / 2016  
**Transaction ID : SA11AI.25989**

Amount of Each Receipt this Period  
 10.40

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Jason Cook**

Mailing Address 4171 Hi-Hill Dr

City State Zip Code  
Lapeer MI 48446

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

Name of Employer Occupation  
Best Effort Best Effort

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
237.35

Date of Receipt  
 /  /   
 05 / 05 / 2016  
**Transaction ID : SA11AI.26083**

Amount of Each Receipt this Period  
 15.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Jason Cook**

Mailing Address 4171 Hi-Hill Dr

City State Zip Code  
Lapeer MI 48446

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

Name of Employer Occupation  
Best Effort Best Effort

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
257.35

Date of Receipt  
 /  /   
 05 / 20 / 2016  
**Transaction ID : SA11AI.26084**

Amount of Each Receipt this Period  
 20.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶  45.40

**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 19 OF 58
	<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 (Last, First, Middle Initial) <b>A. Jason Cook</b>		Date of Receipt MM / DD / YYYY 06 / 01 / 2016 <b>Transaction ID : SA11AI.26085</b>
Mailing Address 4171 Hi-Hill Dr		Amount of Each Receipt this Period 10.56
City Lapeer	State MI	Zip Code 48446
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Donation
Name of Employer Best Effort	Occupation Best Effort	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 267.91	

Full Name (Last, First, Middle Initial) <b>B. Jason Cook</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2016 <b>Transaction ID : SA11AI.26086</b>
Mailing Address 4171 Hi-Hill Dr		Amount of Each Receipt this Period 5.11
City Lapeer	State MI	Zip Code 48446
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Donation
Name of Employer Best Effort	Occupation Best Effort	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.02	

Full Name (Last, First, Middle Initial) <b>C. Jason Cook</b>		Date of Receipt MM / DD / YYYY 06 / 24 / 2016 <b>Transaction ID : SA11AI.26087</b>
Mailing Address 4171 Hi-Hill Dr		Amount of Each Receipt this Period 47.50
City Lapeer	State MI	Zip Code 48446
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Donation
Name of Employer Best Effort	Occupation Best Effort	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.52	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	63.17
<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 20 OF 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Jason Cook**

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 Best Effort	Occupation Best Effort
---------------------------------	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
324.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.26088**

Amount of Each Receipt this Period  
4.46

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Jerry Cumbie**

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 Retired	Occupation 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  
 05 / 30 / 2016  
**Transaction ID : SA11AI.26089**

Amount of Each Receipt this Period  
50.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**c. Jerry Cumbie**

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 Retired	Occupation 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  
 06 / 12 / 2016  
**Transaction ID : SA11AI.26090**

Amount of Each Receipt this Period  
200.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	254.46
<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 21 OF 58
	<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. Jerry Cumbie**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 06 / 26 / 2016  
**Transaction ID : SA11AI.26091**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Donation

**B. Jerry Cumbie**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.26092**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**C. David Eischens**  
 Full Name (Last, First, Middle Initial)  
 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 ESM Schools Occupation Administrator  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 05 / 10 / 2016  
**Transaction ID : SA11AI.26093**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	350.00
<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 58
	<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. David Eischens**  
Full Name (Last, First, Middle Initial)

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 ESM Schools Occupation Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 19 / 2016  
**Transaction ID : SA11AI.26094**

Amount of Each Receipt this Period 50.00

Memo Item  
Donation

**B. David Eischens**  
Full Name (Last, First, Middle Initial)

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 ESM Schools Occupation Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt 06 / 29 / 2016  
**Transaction ID : SA11AI.26095**

Amount of Each Receipt this Period 50.00

Memo Item  
Donation

**C. Samuel Faiello**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Sandy Ridge Road

City Stockton State NJ Zip Code 08559

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

Name of Employer Shore Water Co., Inc. Occupation Management

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 09 / 2016  
**Transaction ID : SA11AI.26096**

Amount of Each Receipt this Period 100.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00

**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 23 OF 58
	(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. Samuel Faiello**  
Full Name (Last, First, Middle Initial)

Mailing Address 7 Sandy Ridge Road

City State Zip Code  
Stockton NJ 08559

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

Name of Employer Occupation  
Shore Water Co., Inc. Management

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
05 / 25 / 2016  
**Transaction ID : SA11AI.26097**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**B. Joe Flaherty**  
Full Name (Last, First, Middle Initial)

Mailing Address 3316 Southern Cove

City State Zip Code  
Cabot AR 72023

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

Name of Employer Occupation  
Retired Retired

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  
04 / 11 / 2016  
**Transaction ID : SA11AI.26098**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

**C. Joe Flaherty**  
Full Name (Last, First, Middle Initial)

Mailing Address 3316 Southern Cove

City State Zip Code  
Cabot AR 72023

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

Name of Employer Occupation  
Retired 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  
05 / 05 / 2016  
**Transaction ID : SA11AI.26099**

Amount of Each Receipt this Period  
25.00

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 24 OF 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot State AR Zip Code 72023

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

Name of Employer Retired Occupation Retired

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  
**05 / 13 / 2016**

**Transaction ID : SA11AI.26100**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**B. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot State AR Zip Code 72023

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

Name of Employer Retired Occupation 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  
**05 / 20 / 2016**

**Transaction ID : SA11AI.26101**

Amount of Each Receipt this Period  
**10.00**

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**C. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot State AR Zip Code 72023

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **95.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 22 / 2016**

**Transaction ID : SA11AI.26102**

Amount of Each Receipt this Period  
**10.00**

Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **45.00**

**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 25 OF 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot	State AR	Zip Code 72023
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
105.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	26	/	2016

**Transaction ID : SA11AI.26103**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot	State AR	Zip Code 72023
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

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
06	/	07	/	2016

**Transaction ID : SA11AI.26104**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot	State AR	Zip Code 72023
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
125.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	16	/	2016

**Transaction ID : SA11AI.26105**

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: PAGE 26 OF 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot	State AR	Zip Code 72023
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
135.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2016

**Transaction ID : SA11AI.26106**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Joe Flaherty**

Mailing Address 3316 Southern Cove

City Cabot	State AR	Zip Code 72023
---------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
160.00

Date of Receipt  

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

**Transaction ID : SA11AI.26107**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Matthew Fuchs**

Mailing Address 2633 Geyerwood Ct

City Grove City	State OH	Zip Code 43123
--------------------	-------------	-------------------

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

Name of Employer Self-employed	Occupation Sales
-----------------------------------	---------------------

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
05	/	09	/	2016

**Transaction ID : SA11AI.26109**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	135.00
<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 27 OF 58
	<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. Matthew Fuchs**  
Full Name (Last, First, Middle Initial)

Mailing Address 2633 Geyerwood Ct

City Grove City State OH Zip Code 43123

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

Name of Employer Self-employed Occupation Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
06 / 06 / 2016  
**Transaction ID : SA11AI.26110**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

**B. Ann Gabel**  
Full Name (Last, First, Middle Initial)

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 None Occupation Best Effort

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2016  
**Transaction ID : SA11AI.26111**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

**C. Ann Gabel**  
Full Name (Last, First, Middle Initial)

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 None Occupation Best Effort

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt  
MM / DD / YYYY  
05 / 15 / 2016  
**Transaction ID : SA11AI.26112**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	130.00
<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 28 OF 58
	<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. Ann Gabel**  
 Full Name (Last, First, Middle Initial)  
 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 None Occupation Best Effort  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **40.00**

Date of Receipt **05 / 19 / 2016**  
**Transaction ID : SA11AI.26113**  
 Amount of Each Receipt this Period **10.00**  
 Memo Item  
 Donation

**B. Ann Gabel**  
 Full Name (Last, First, Middle Initial)  
 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 None Occupation Best Effort  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **50.00**

Date of Receipt **06 / 01 / 2016**  
**Transaction ID : SA11AI.26114**  
 Amount of Each Receipt this Period **10.00**  
 Memo Item  
 Donation

**C. Ann Gabel**  
 Full Name (Last, First, Middle Initial)  
 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 None Occupation Best Effort  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **65.00**

Date of Receipt **06 / 12 / 2016**  
**Transaction ID : SA11AI.26115**  
 Amount of Each Receipt this Period **15.00**  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>35.00</b>
<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 29 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Ann Gabel**

Mailing Address 3664 S. Lakeshore Drive

City State Zip Code  
Byrnes Mill MO 63051

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

Name of Employer Occupation  
None Best Effort

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  
 06 / 15 / 2016  
**Transaction ID : SA11AI.26116**

Amount of Each Receipt this Period  
10.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Ann Gabel**

Mailing Address 3664 S. Lakeshore Drive

City State Zip Code  
Byrnes Mill MO 63051

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

Name of Employer Occupation  
None Best Effort

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  
 06 / 28 / 2016  
**Transaction ID : SA11AI.26117**

Amount of Each Receipt this Period  
25.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. HESSIE HARRIS**

Mailing Address 12901 Bluet Lane

City State Zip Code  
Silver Springs MD 20906

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

Name of Employer Occupation  
Compliance, Inc. General Worker

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  
 05 / 10 / 2016  
**Transaction ID : SA11AI.26118**

Amount of Each Receipt this Period  
500.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 535.00

**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 30 OF 58
	<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 (Last, First, Middle Initial)  
**A. Leslie Hay**

Mailing Address 563 Cloverdale Rd

City	State	Zip Code
Montgomery	AL	36106

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

Name of Employer	Occupation
State of AL	IT Manager

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  
 05 / 14 / 2016  
**Transaction ID : SA11Al.26119**

Amount of Each Receipt this Period  
 100.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**B. Stuart C. Jones**

Mailing Address 5530 Mossy Oak Road

City	State	Zip Code
Moseley	VA	23120

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

Name of Employer	Occupation
Chicago Bridge and Iron, Inc.	Nuclear Power Engineer

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  
 05 / 12 / 2016  
**Transaction ID : SA11Al.26143**

Amount of Each Receipt this Period  
 100.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**C. William McCraw**

Mailing Address 1600 Condor Court

City	State	Zip Code
Chesapeake	VA	23321

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

Name of Employer	Occupation
IBM	Test Engineer

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  
 05 / 20 / 2016  
**Transaction ID : SA11Al.26129**

Amount of Each Receipt this Period  
 100.00

Memo Item  
 Donation

<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:	PAGE 31 OF 58
	(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**

Full Name (Last, First, Middle Initial)  
**A. William McCraw**

Mailing Address 1600 Condor Court

City Chesapeake State VA Zip Code 23321

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

Name of Employer Occupation  
IBM Test Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2016

**Transaction ID : SA11AI.26130**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Roy Porter**

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 Occupation  
Retired Retiree

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2016

**Transaction ID : SA11AI.26132**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Roy Porter**

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 Occupation  
Retired Retiree

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2016

**Transaction ID : SA11AI.26133**

Amount of Each Receipt this Period  
100.00

Memo Item  
Donation

<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 32 OF 58
	<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**

Full Name (Last, First, Middle Initial) <b>A. Carlton Roach</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2016 <b>Transaction ID : SA11AI.26122</b>
Mailing Address 1707 Carol Stream Dr.		Amount of Each Receipt this Period 50.00
City Richardson	State TX	Zip Code 75081
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Donation	
Name of Employer Urban Inter-Tribal Center - TX	Occupation Urban Inter-Tribal Center - TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) <b>B. Carlton Roach</b>		Date of Receipt MM / DD / YYYY 05 / 26 / 2016 <b>Transaction ID : SA11AI.26124</b>
Mailing Address 1707 Carol Stream Dr.		Amount of Each Receipt this Period 50.00
City Richardson	State TX	Zip Code 75081
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Donation	
Name of Employer Urban Inter-Tribal Center - TX	Occupation Urban Inter-Tribal Center - TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>C. Carlton Roach</b>		Date of Receipt MM / DD / YYYY 06 / 22 / 2016 <b>Transaction ID : SA11AI.26125</b>
Mailing Address 1707 Carol Stream Dr.		Amount of Each Receipt this Period 50.00
City Richardson	State TX	Zip Code 75081
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/> Donation	
Name of Employer Urban Inter-Tribal Center - TX	Occupation Urban Inter-Tribal Center - TX	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

<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 33 OF 58
	<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. Carlton Roach**  
 Full Name (Last, First, Middle Initial)  
 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 Urban Inter-Tribal Center - TX Occupation Urban Inter-Tribal Center - TX  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11AI.26126**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**B. Karen Roth**  
 Full Name (Last, First, Middle Initial)  
 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 None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 04 / 21 / 2016  
**Transaction ID : SA11AI.26134**  
 Amount of Each Receipt this Period 75.00  
 Memo Item  
 Donation

**C. Karen Roth**  
 Full Name (Last, First, Middle Initial)  
 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 None Occupation Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 06 / 01 / 2016  
**Transaction ID : SA11AI.26135**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 425.00  
**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 34 OF 58
	<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. Maria Seitz**  
Full Name (Last, First, Middle Initial)

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 Miami Dade College	Occupation Adjunct Professor
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 10 / 2016  
**Transaction ID : SA11AI.26136**

Amount of Each Receipt this Period  
40.00

Memo Item  
Donation

**B. Maria Seitz**  
Full Name (Last, First, Middle Initial)

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 Miami Dade College	Occupation Adjunct Professor
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2016  
**Transaction ID : SA11AI.26137**

Amount of Each Receipt this Period  
40.00

Memo Item  
Donation

**C. Maria Seitz**  
Full Name (Last, First, Middle Initial)

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 Miami Dade College	Occupation Adjunct Professor
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
120.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.26138**

Amount of Each Receipt this Period  
40.00

Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	120.00
<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 58
	<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. Maria Seitz**  
Full Name (Last, First, Middle Initial)

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 Miami Dade College	Occupation Adjunct Professor
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
140.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11AI.26139**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**B. Maria Seitz**  
Full Name (Last, First, Middle Initial)

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 Miami Dade College	Occupation Adjunct Professor
--	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
160.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.26140**

Amount of Each Receipt this Period  
20.00

Memo Item  
Donation

**C. Mr and Mrs Orville Shoemaker**  
Full Name (Last, First, Middle Initial)

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 Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2016  
**Transaction ID : SA11AI.26141**

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: PAGE 36 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Lorrie Vidal**

Mailing Address 2304 Mathews Ave., Unit 6

City State Zip Code  
Redondo Beach CA 90278

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

Name of Employer Occupation  
ALG Global Logistics Best Effort

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
**06 / 27 / 2016**

**Transaction ID : SA11AI.26151**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**B. Brian Vocca**

Mailing Address 100 Spinning Wheel Ct

City State Zip Code  
West Lafayette IN 47906

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

Name of Employer Occupation  
Self Employed Computer Systems Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **100.00**

Date of Receipt  
**05 / 10 / 2016**

**Transaction ID : SA11AI.26145**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
Donation

Full Name (Last, First, Middle Initial)  
**C. Brian Vocca**

Mailing Address 100 Spinning Wheel Ct

City State Zip Code  
West Lafayette IN 47906

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

Name of Employer Occupation  
Self Employed Computer Systems Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **200.00**

Date of Receipt  
**06 / 15 / 2016**

**Transaction ID : SA11AI.26146**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **700.00**

**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 37 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

Full Name (Last, First, Middle Initial)  
**A. Karen Woodbury**

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 Declined Occupation Declined

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 16 / 2016  
**Transaction ID : SA11AI.26147**

Amount of Each Receipt this Period  
 20.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**B. Karen Woodbury**

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 Declined Occupation Declined

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  
 05 / 16 / 2016  
**Transaction ID : SA11AI.26148**

Amount of Each Receipt this Period  
 20.00

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**C. Karen Woodbury**

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 Declined Occupation Declined

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 270.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 16 / 2016  
**Transaction ID : SA11AI.26149**

Amount of Each Receipt this Period  
 20.00

Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 58
	<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. Karen Woodbury**  
Full Name (Last, First, Middle Initial)  
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 Declined Occupation Declined  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **370.00**

Date of Receipt **06 / 28 / 2016**  
**Transaction ID : SA11AI.26150**  
Amount of Each Receipt this Period **100.00**  
 Memo Item  
Donation

**B. Robert Yeary**  
Full Name (Last, First, Middle Initial)  
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 Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **650.00**

Date of Receipt **04 / 16 / 2016**  
**Transaction ID : SA11AI.26152**  
Amount of Each Receipt this Period **50.00**  
 Memo Item  
Donation

**C. Robert Yeary**  
Full Name (Last, First, Middle Initial)  
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 Retired Occupation Retired  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **700.00**

Date of Receipt **05 / 09 / 2016**  
**Transaction ID : SA11AI.26153**  
Amount of Each Receipt this Period **50.00**  
 Memo Item  
Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>200.00</b>
<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 39 OF 58  
(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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NAME OF COMMITTEE (In Full)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)  
**A. Robert Yeary**

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 Retired Occupation Retired

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  
**05 / 13 / 2016**

**Transaction ID : SA11Al.26154**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
 Donation

Full Name (Last, First, Middle Initial)  
**B. Robert Yeary**

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 Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 16 / 2016**

**Transaction ID : SA11Al.26155**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
 Donation

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

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 Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 19 / 2016**

**Transaction ID : SA11Al.26156**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **200.00**

**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 40 OF 58
	<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. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 05 / 25 / 2016  
**Transaction ID : SA11AI.26157**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 Donation

**B. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 06 / 01 / 2016  
**Transaction ID : SA11AI.26158**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Donation

**C. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify)

Date of Receipt  
 06 / 07 / 2016  
**Transaction ID : SA11AI.26159**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item  
 Donation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200.00
<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 41 OF 58  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 06 / 15 / 2016  
**Transaction ID : SA11AI.26160**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 06 / 18 / 2016  
**Transaction ID : SA11AI.26161**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**C. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 06 / 23 / 2016  
**Transaction ID : SA11AI.26162**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 200.00  
**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 42 OF 58
	<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. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 28 / 2016  
**Transaction ID : SA11AI.26163**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

**B. Robert Yeary**  
 Full Name (Last, First, Middle Initial)  
 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 Retired Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 29 / 2016  
**Transaction ID : SA11AI.26164**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Donation

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9174.03

**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 58  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 17
<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 (Last, First, Middle Initial)  
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 Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 299.88

Date of Receipt  
MM / DD / YYYY  
06 / 27 / 2016  
**Transaction ID : SA15.26205**  
Amount of Each Receipt this Period  
299.88  
 Memo Item  
Refund of charges for website hosting

**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  
MM / DD / YYYY  
Amount of Each Receipt this Period  
 Memo Item

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

Date of Receipt  
MM / DD / YYYY  
Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	299.88
<b>TOTAL</b> This Period (last page this line number only).....▶	299.88

**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 58
<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 (Last, First, Middle Initial)  
**A. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City	State	Zip Code
Mt. View	CA	94043

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1616.31

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	22	/	2016

**Transaction ID : SA17.26176**

Amount of Each Receipt this Period  
411.13

Memo Item  
Website advertising revenue

Full Name (Last, First, Middle Initial)  
**B. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City	State	Zip Code
Mt. View	CA	94043

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1890.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2016

**Transaction ID : SA17.26177**

Amount of Each Receipt this Period  
274.13

Memo Item  
Website advertising revenue

Full Name (Last, First, Middle Initial)  
**C. Google Adwords**

Mailing Address 1600 Amphitheater Pkwy.

City	State	Zip Code
Mt. View	CA	94043

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2189.96

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

**Transaction ID : SA17.26178**

Amount of Each Receipt this Period  
299.52

Memo Item  
Website advertising revenue

<b>SUBTOTAL</b> of Receipts This Page (optional).....	984.78
<b>TOTAL</b> This Period (last page this line number only).....	984.78

**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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Beach List Direct, Inc.**

Mailing Address 4605 Villa Green Drive

City Nashville State TN Zip Code 37215

Purpose of Disbursement  
Mailing list for fundraising

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 06 / 2016

Transaction ID : **SB21B.26195**

Amount of Each Disbursement this Period

255.00

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 fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 26 / 2016

Transaction ID : **SB21B.26182**

Amount of Each Disbursement this Period

72.70

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  
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  
05 / 26 / 2016

Transaction ID : **SB21B.26183**

Amount of Each Disbursement this Period

1456.31

Memo Item

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

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

1784.01

**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)  
**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  
Payroll fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

**Transaction ID : SB21B.26184**

Amount of Each Disbursement this Period

91.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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  
04 / 06 / 2016

**Transaction ID : SB21B.26198**

Amount of Each Disbursement this Period

104.94

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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  
05 / 16 / 2016

**Transaction ID : SB21B.26199**

Amount of Each Disbursement this Period

51.96

Memo Item

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

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

248.70

**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)  
**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) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2016

**Transaction ID : SB21B.26200**

Amount of Each Disbursement this Period

17.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 17 / 2016

**Transaction ID : SB21B.26201**

Amount of Each Disbursement this Period

52.48

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2016

**Transaction ID : SB21B.26202**

Amount of Each Disbursement this Period

43.47

Memo Item

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

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

113.44

**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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Hostmonster**

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

**Transaction ID : SB21B.26204**

Amount of Each Disbursement this Period

299.88

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

MM / DD / YYYY  
04 / 11 / 2016

**Transaction ID : SB21B.26207**

Amount of Each Disbursement this Period

449.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. 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

MM / DD / YYYY  
05 / 11 / 2016

**Transaction ID : SB21B.26208**

Amount of Each Disbursement this Period

449.00

Memo Item

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

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

1197.88



**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)  
**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

M M M / D D D / Y Y Y Y Y Y  
06 / 13 / 2016

Transaction ID : **SB21B.26209**

Amount of Each Disbursement this Period

449.00

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 delivery service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 04 / 2016

Transaction ID : **SB21B.26210**

Amount of Each Disbursement this Period

150.00

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 delivery service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 03 / 2016

Transaction ID : **SB21B.26211**

Amount of Each Disbursement this Period

150.00

Memo Item

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

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

749.00

**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)  
**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 delivery service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 07 / 2016

Transaction ID : **SB21B.26212**

Amount of Each Disbursement this Period

75.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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

MM / DD / YYYY  
04 / 07 / 2016

Transaction ID : **SB21B.26216**

Amount of Each Disbursement this Period

55.00

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

MM / DD / YYYY  
05 / 09 / 2016

Transaction ID : **SB21B.26217**

Amount of Each Disbursement this Period

55.00

Memo Item

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

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

185.00

**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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. 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

M M M / D D D / Y Y Y Y Y Y  
06 / 08 / 2016

**Transaction ID : SB21B.26218**

Amount of Each Disbursement this Period

55.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. North Raleigh Business Center**

Mailing Address 4030 Wake Forest Rd  
#300

City Raleigh State NC Zip Code 27609

Purpose of Disbursement  
Office rent

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 06 / 2016

**Transaction ID : SB21B.26221**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rackspace**

Mailing Address 1 Fanatical Place  
City of Windcrest

City San Antonio State TX Zip Code 78218

Purpose of Disbursement  
Email delivery service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 29 / 2016

**Transaction ID : SB21B.26215**

Amount of Each Disbursement this Period

16.00

Memo Item

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

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

121.00

**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)  
**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  
04 / 18 / 2016

Transaction ID : SB21B.26224

Amount of Each Disbursement this Period

152.22

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  
05 / 17 / 2016

Transaction ID : SB21B.26225

Amount of Each Disbursement this Period

0.00

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  
06 / 17 / 2016

Transaction ID : SB21B.26226

Amount of Each Disbursement this Period

152.22

Memo Item

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

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

304.44

**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)  
**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

/  /

Transaction ID : **SB21B.26227**

Amount of Each Disbursement this Period

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

/  /

Transaction ID : **SB21B.26228**

Amount of Each Disbursement this Period

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

/  /

Transaction ID : **SB21B.26229**

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"/> 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)  
**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  
06 / 20 / 2016

Transaction ID : **SB21B.26230**

Amount of Each Disbursement this Period

12.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. 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  
04 / 01 / 2016

Transaction ID : **SB21B.26172**

Amount of Each Disbursement this Period

287.35

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  
05 / 13 / 2016

Transaction ID : **SB21B.26173**

Amount of Each Disbursement this Period

1699.83

Memo Item

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

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

1999.22

**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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. Westmoreland Printers**

Mailing Address 2020 E Dixon Blvd

City State Zip Code  
Shelby NC 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

/  /

**Transaction ID : SB21B.26174**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. William Gheen**

Mailing Address PO Box 30966

City State Zip Code  
Raleigh NC 27622

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.26165**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. William Gheen**

Mailing Address PO Box 30966

City State Zip Code  
Raleigh NC 27622

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.26166**

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

Full Name (Last, First, Middle Initial)

**A. William Gheen**

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2016

**Transaction ID : SB21B.26167**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. William Gheen**

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2016

**Transaction ID : SB21B.26168**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. William Gheen**

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement  
Salary

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 / 2016

**Transaction ID : SB21B.26169**

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

4000.00



**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)  
**Americans for Legal Immigration PAC**

Full Name (Last, First, Middle Initial)

**A. William Gheen**

Mailing Address PO Box 30966

City Raleigh State NC Zip Code 27622

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 22 / 2016

**Transaction ID : SB21B.26170**

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Xpert Technology Computer Repair**

Mailing Address 3325 Rogers Rd #116

City Wake Forest State NC Zip Code 27587

Purpose of Disbursement  
Computer repair

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2016

**Transaction ID : SB21B.26231**

Amount of Each Disbursement this Period

228.43

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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

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

2228.43

16468.55

**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 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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3100.00	1844.51	1255.49

**TERMS**

Date Incurred: MM / DD / YYYY  /  /  Date Due: MM / DD / YYYY  /  Interest Rate:  % (apr) Secured:  Yes  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: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1255.49
<b>TOTALS</b> This Period (last page in this line only).....▶	1255.49

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