

# FEC FORM 3P

# REPORT OF RECEIPTS AND DISBURSEMENTS

BY AN AUTHORIZED COMMITTEE OF A CANDIDATE FOR THE OFFICE OF PRESIDENT OR VICE PRESIDENT

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

Santorum for President 2016

ADDRESS (number and street)

P.O. Box 238

Check if different than previously reported. (ACC)

Verona

CITY

PA

STATE

15147

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C

C00578492

3. THIS REPORT IS FOR Primary

or General

4. TYPE OF REPORT (Choose One)

Check here if this is a Termination Report (TER)

Quarterly Reports:

Monthly Reports:

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

Thirtieth day report following the General Election

on  /  /

Twelfth day report preceding election

on  /  /  in the State of

Is this Report an Amendment?

yes

no

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer

Greg Rothman

Signature of Treasurer

Greg Rothman

[Electronically Filed]

Date

/  /

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

Office Use Only

Write or Type Committee Name

# Santorum for President 2016

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

## SUMMARY

6. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	<input type="text" value="0.00"/>
7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 3) .....	<input type="text" value="607617.07"/>
8. SUBTOTAL (Lines 6 and 7) .....	<input type="text" value="607617.07"/>
9. TOTAL DISBURSEMENTS THIS PERIOD (From Line 30, Column A, Page 2) .....	<input type="text" value="375598.81"/>
10. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 9 from 8.....)	<input type="text" value="232018.26"/>
11. DEBTS AND OBLIGATIONS OWED TO THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="0.00"/>
12. DEBTS AND OBLIGATIONS OWED BY THE COMMITTEE (Itemize All on Schedule C-P or Schedule D-P).....	<input type="text" value="124638.55"/>
13. EXPENDITURES SUBJECT TO LIMITATION .....	<input type="text" value="375598.81"/>

## NET ELECTION CYCLE-TO-DATE CONTRIBUTIONS AND EXPENDITURES

14. NET CONTRIBUTIONS (Other than Loans) (Subtract Line 28d, Column B from 17e, Column B, Page 2) .....	<input type="text" value="606990.77"/>
15. NET OPERATING EXPENDITURES (Subtract Line 20a, Column B from 23, Column B, Page 2).....	<input type="text" value="375598.81"/>

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Receipts

NAME OF COMMITTEE (in Full)

**Santorum for President 2016**

Report Covering the Period: From:

MM / DD / YYYY  
04 / 01 / 2015

To:

MM / DD / YYYY  
06 / 30 / 2015

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P) .....	0.00	0.00
17. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) itemized .....	469122.58	469122.58
(ii) unitemized .....	137868.19	137868.19
(iii) Total contributions .....	606990.77	606990.77
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees .....	0.00	0.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17(c) and 17(d)) .....	606990.77	606990.77
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOANS RECEIVED:		
(a) Loans Received From or Guaranteed by Candidate .....	0.00	0.00
(b) Other Loans .....	0.00	0.00
(c) TOTAL LOANS (Add 19(a) and 19(b)) .....	0.00	0.00
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.):		
(a) Operating .....	0.00	0.00
(b) Fundraising .....	0.00	0.00
(c) Legal and Accounting .....	0.00	0.00
(d) TOTAL OFFSETS TO EXPENDITURES (Add 20(a), 20(b) and 20(c)) .....	0.00	0.00
21. OTHER RECEIPTS (Dividends, Interest, etc.) .....	626.30	626.30
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d) and 21) .....	607617.07	607617.07

**DETAILED SUMMARY PAGE**

FEC Form 3P (Rev. 03/2011)

of Disbursements and Contributed Items

NAME OF COMMITTEE (in Full)

Santorum for President 2016

Report Covering the Period: From:

MM / DD / YYYY  
04 / 01 / 2015

To:

MM / DD / YYYY  
06 / 30 / 2015

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

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

23. OPERATING EXPENDITURES.....	375598.81	375598.81
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
25. FUNDRAISING DISBURSEMENTS .....	0.00	0.00
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS.....	0.00	0.00
27. LOAN REPAYMENTS MADE:		
(a) Repayments of Loans made or Guaranteed by Candidate.....	0.00	0.00
(b) Other Repayments .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b)).....	0.00	0.00
28. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b) and 28(c)) .....	0.00	0.00
29. OTHER DISBURSEMENTS .....	0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29) .....	375598.81	375598.81

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

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

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

Office Use Only

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

2. FEC IDENTIFICATION NUMBER

C C00578492

Santorum for President 2016

ADDRESS (number and street)

P.O. Box 238

Verona

CITY

PA

STATE

15147

ZIP CODE

3. NAME OF CANDIDATE

**ALLOCATION BY STATE**

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

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MARC ABEAR**

Mailing Address 39 HIGGINS ROAD

City MEREDITH State NH Zip Code 03253

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10980**

Date of Receipt

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

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
-------------------------------------

**B.** Full Name (Last, First, Middle Initial)  
**DR. ANDREW ABELA**

Mailing Address 1114 RIVA RIDGE DR

City GREAT FALLS State VA Zip Code 22066-1612

FEC ID number of contributing federal political committee.

Name of Employer THE CATHOLIC UNIVERSITY OF AMERICA Occupation PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4110**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

**C.** Full Name (Last, First, Middle Initial)  
**MS. MAGDA M. AGUILA**

Mailing Address 7 CURRENT DRIVE

City GREENVILLE State SC Zip Code 29611-7271

FEC ID number of contributing federal political committee.

Name of Employer SELF-EMPLOYED Occupation CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4139**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**SHELLEY AHLERSMEYER**

Mailing Address 84 POPLAR ST

City State Zip Code  
WARSAW IN 46582-6322

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4143**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**NATALIA ALCANTARA**

Mailing Address 1 BROAD ST UNIT 19D

City State Zip Code  
STAMFORD CT 06901-2335

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ENIGMA SOFTWARE EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4155**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ELISABETH A. ALDER**

Mailing Address 9 BRIARHURST DRIVE

City State Zip Code  
FLANDERS NJ 07836-4302

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4159**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**DON ALLEN**

Mailing Address 600 LOMA VISTA

City State Zip Code  
HEATH TX 75032-2010

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
COMMUNICATIONS UNLIMITED PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4165**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. WENDEL C. ALMOND**

Mailing Address 696 HARRIS LANE

City State Zip Code  
WHITEWRIGHT TX 75491-5940

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4172**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES A. ANDERSON**

Mailing Address 3822 STRATFORD AVENUE

City State Zip Code  
DALLAS TX 75205-2815

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BANDERA VENTURES, LP REAL ESTATE DEVELOPMENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4204**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES ANDERSON**

Mailing Address 2002 BRAZOS COURT

City WESTLAKE State TX Zip Code 76262-4804

FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED Occupation PRIVATE INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4202**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. KIM ANDERSON**

Mailing Address 3822 STRATFORD AVENUE

City DALLAS State TX Zip Code 75205-2815

FEC ID number of contributing federal political committee.

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4218**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MILTON ANDERSON**

Mailing Address 1301 CAROLINA CT

City GARLAND State TX Zip Code 75044-4413

FEC ID number of contributing federal political committee.

Name of Employer MERRIMAN ASSOCIATES ARCHITECTS Occupation VP DIRECTOR OF DESIGN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4225**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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





**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**LORI BARDSLEY**

Mailing Address 4211 DUNKIRK DR

City BURLINGTON State NC Zip Code 27215-0105

FEC ID number of contributing federal political committee.

Name of Employer UNEMPLOYED Occupation UNEMPLOYED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11082**

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. LYLE D. BARRETT**

Mailing Address P.O. BOX 356  
163 E. GRANT AVENUE

City DAYTON State PA Zip Code 16222-0356

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4436**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION  
Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT H. BARRETTE**

Mailing Address 34 PEDERZINI DRIVE

City MEDFIELD State MA Zip Code 02052-1426

FEC ID number of contributing federal political committee.

Name of Employer MERRILL LYNCH Occupation FINANCIAL ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4438**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION  
Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MS. JACQUELINE M. BAUER**

Mailing Address 30 ISABELLA STREET

City State Zip Code  
PITTSBURGH PA 15212-5862

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

Name of Employer Occupation  
ALLEGHENY HEALTH NETWORK ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.4462**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. LEE BEAMAN**

Mailing Address 1525 BROADWAY

City State Zip Code  
NASHVILLE TN 37203-3121

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

Name of Employer Occupation  
BEAMAN AUTOMOTIVE AUTO DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

**Transaction ID : SA17A.4480**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
5400.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEE BEAMAN**

Mailing Address 1525 BROADWAY

City State Zip Code  
NASHVILLE TN 37203-3121

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

Name of Employer Occupation  
BEAMAN AUTOMOTIVE AUTO DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11173**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Redesignate: To General

Amount of Each Receipt this Period  
-2700.00

**[MEMO ITEM]**

**Subtotal Of Receipts This Page** (optional).....▶ 5900.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEE BEAMAN**

Mailing Address 1525 BROADWAY

City State Zip Code  
NASHVILLE TN 37203-3121

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

Name of Employer Occupation  
BEAMAN AUTOMOTIVE AUTO DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11174**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period  
2700.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HENRICUS P. BEEKWILDER**

Mailing Address 2407 FLAGSTICK DRIVE

City State Zip Code  
MATTHEWS NC 28104-0636

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

**Transaction ID : SA17A.4513**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
350.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN BENTHAL**

Mailing Address 61 HERNCHS LANE

City State Zip Code  
RIVERHEAD NY 11901

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

Name of Employer Occupation  
SELF-EMPLOYED FREELANCE WRITER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.4541**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
300.00

**Subtotal Of Receipts This Page** (optional).....▶ 650.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE M. BERNIER**

Mailing Address 1400 S. JOYCE STREET #1516

City	State	Zip Code
ARLINGTON	VA	22202-1857

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VAN SCOYOC ASSOCIATES	DIRECTOR, GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4560**

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="750.00"/>
-------------------------------------

**B.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE M. BERNIER**

Mailing Address 1400 S. JOYCE STREET #1516

City	State	Zip Code
ARLINGTON	VA	22202-1857

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
VAN SCOYOC ASSOCIATES	DIRECTOR, GOVERNMENT RELATIONS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4561**

Date of Receipt

M M / D D / Y Y Y Y
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
-------------------------------------

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY JANE BERNIER**

Mailing Address 287 LANGLEY ROAD  
UNIT 1

City	State	Zip Code
NEWTON CENTER	MA	02459-2373

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4563**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="540.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT BEUTZ**

Mailing Address 1341 LAKE DRIVE WEST  
APARTMENT B213

City State Zip Code  
CHANHASSEN MN 55317-3519

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4581**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MS. DONNA BLACKARD**

Mailing Address 401 ADRIATIC PKWY

City State Zip Code  
MCKINNEY TX 75070-5602

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DONNA BELLA CHAPEL, LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4607**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MS. DONNA BLACKARD**

Mailing Address 401 ADRIATIC PKWY

City State Zip Code  
MCKINNEY TX 75070-5602

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DONNA BELLA CHAPEL, LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4608**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. JEFFORY D. BLACKARD**

Mailing Address 401 ADRIATIC PARKWAY

City MCKINNEY State TX Zip Code 75070-5602

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BLACKARD GLOBAL REAL ESTATE INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4612**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			15			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
--------------------------------------

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

**MR. CLYDE BLAIR**

Mailing Address 4067 N 107TH TERR

City KANSAS CITY State KS Zip Code 66109-4255

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
FIRSTLINE TRANSPORTATION SECURITY TRANSPORTATION SECURITY OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4621**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**C. Full Name (Last, First, Middle Initial)**

**MR. STEVEN BOENDER**

Mailing Address 2052 - 275TH STREET

City OSKALOOSA State IA Zip Code 52577-9057

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4649**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**Subtotal Of Receipts This Page (optional)**.....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. DONALD W. BRANTZ**

Mailing Address 23820 BROTHERS AVENUE

City State Zip Code  
GLENWOOD IA 51534

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4738**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
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**B.** Full Name (Last, First, Middle Initial)

**MR. DONALD W. BRANTZ**

Mailing Address 23820 BROTHERS AVENUE

City State Zip Code  
GLENWOOD IA 51534

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4739**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
-------------------------------------

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

**MR. DONALD W. BRANTZ**

Mailing Address 23820 BROTHERS AVENUE

City State Zip Code  
GLENWOOD IA 51534

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.4740**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="50.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 22 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**DAVID BRICKMAN**

Mailing Address 7434 BAXTERSHIRE DRIVE

City State Zip Code  
DALLAS TX 75230-2430

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

Name of Employer Occupation  
CAPITAL SENIOR LIVING GENERAL COUNSEL

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.4756**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
500.00

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

**MR. JAMES J. BROUSSARD**

Mailing Address 456 EATON RD

City State Zip Code  
DREXEL HILL PA 19026-1205

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

Name of Employer Occupation  
SELF-EMPLOYED INSURANCE BROKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.4790**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 06 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
250.00

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

**PATTI BROWN**

Mailing Address 31565 NAPA VALLEY DR

City State Zip Code  
WAUKEE IA 50263-7074

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

Name of Employer Occupation  
IOWA POLICY INSTITUTE DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.4810**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
250.00

**Subtotal Of Receipts This Page (optional)**.....▶ 1000.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**PATTI BROWN**

Mailing Address 31565 NAPA VALLEY DR

City	State	Zip Code
WAUKEE	IA	50263-7074

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

Name of Employer	Occupation
IOWA POLICY INSTITUTE	DIRECTOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 375.00

**Transaction ID : SA17A.4811**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 125.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES BRUDER**

Mailing Address 600 REED RD

City	State	Zip Code
BROOMALL	PA	19008-3505

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.4824**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES BRUDER**

Mailing Address 600 REED RD

City	State	Zip Code
BROOMALL	PA	19008-3505

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 5400.00

**Transaction ID : SA17A.4821**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 5525.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**JAMES BRUDER**

Mailing Address 600 REED RD

City BROOMALL State PA Zip Code 19008-3505

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11178**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Redesignate: To General

Amount of Each Receipt this Period

2700.00
---------

**[MEMO ITEM]**

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

**JAMES BRUDER**

Mailing Address 600 REED RD

City BROOMALL State PA Zip Code 19008-3505

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11179**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Redesignate: From Primary

Amount of Each Receipt this Period

2700.00
---------

**[MEMO ITEM]**

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

**MARIPEG BRUDER**

Mailing Address 600 REED RPAD

City BROOMALL State PA Zip Code 19008-3505

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2700.00

**Transaction ID : SA17A.4826**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

2700.00
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Subtotal Of Receipts This Page (optional).....▶ 2700.00

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





# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:

PAGE 26 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MRS. LAURA I. BURKE**

Mailing Address 10917 BECKMAN WAY

City	State	Zip Code
GREAT FALLS	VA	22066-3318

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.4881**

Date of Receipt

M M / D D / Y Y Y Y
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 2700.00
---------------

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

**TIM BUSCH**

Mailing Address 2532 DUPONT DRIVE

City	State	Zip Code
IRVINE	CA	92612

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

Name of Employer	Occupation
THE BUSCH FIRM	ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.11029**

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Receipt this Period

_____ 2700.00
---------------

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

**MARC BUTLER**

Mailing Address 143 NORTH ROCKYCLIFF TR.

City	State	Zip Code
FRANKTOWN	CO	80116-9107

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

Name of Employer	Occupation
J.R.BUTLER,INC	CEO

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.4899**

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

_____ 2700.00
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**Subtotal Of Receipts This Page** (optional).....▶ 

_____ 8100.00
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**Total This Period** (last page this line number only).....▶ 

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**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. REBECCA SUE CIPOLLONE**

Mailing Address 7610 CARTER CT

City State Zip Code  
BETHESDA MD 20817-1411

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5075**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. LARRY D. CIRIGNANO**

Mailing Address 3426 MANFIELD ROAD

City State Zip Code  
FALLS CHURCH VA 22041-1427

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5078**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. LARRY D. CIRIGNANO**

Mailing Address 3426 MANFIELD ROAD

City State Zip Code  
FALLS CHURCH VA 22041-1427

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5079**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LARRY D. CIRIGNANO**

Mailing Address 3426 MANFIELD ROAD

City State Zip Code  
FALLS CHURCH VA 22041-1427

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5080**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**SALLY CLIMER**

Mailing Address P.O. BOX 1

City State Zip Code  
WILDERSVILLE TN 38388-0001

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED RANCHER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5107**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**DAVID COBB**

Mailing Address 4415 SUNSHADOW

City State Zip Code  
SAN ANTONIO TX 78217-4327

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED HVAC CONTRACTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5122**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM CONLON**

Mailing Address 184 ONTARIO AVE.

City State Zip Code  
MASSAPEQUA NY 11758-3937

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

Name of Employer Occupation  
VERIZON COMMUNICATIONS SALES ASSOCIATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.5167**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES CONNOLLY**

Mailing Address 655 JOSEPH DRIVE

City State Zip Code  
WAYNE PA 19087-1018

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.5173**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA CORCORAN**

Mailing Address 7140 WESTLAKE

City State Zip Code  
DALLAS TX 75214-3546

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.5222**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 3750.00

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





**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MS. REBECCA D. CORMAN**

Mailing Address 1230 SYLVAN CIR

City State Zip Code  
BELLEFONTE PA 16823-2502

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.5239**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A. CRISANTI**

Mailing Address 246 CASTLE ROAD

City State Zip Code  
PITTSBURGH PA 15234-2309

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

**Transaction ID : SA17A.5286**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

400.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A. CRISANTI**

Mailing Address 246 CASTLE ROAD

City State Zip Code  
PITTSBURGH PA 15234-2309

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
900.00

**Transaction ID : SA17A.5287**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

500.00

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

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES A. D'ALESSIO**

Mailing Address 209 FETTERBUSH RD

City	State	Zip Code
ELGIN	SC	29045-9185

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BLUE CROSS BLUE SHIELD SOUTH CAROLINA	VP

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5360**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES A. D'ALESSIO**

Mailing Address 209 FETTERBUSH RD

City	State	Zip Code
ELGIN	SC	29045-9185

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BLUE CROSS BLUE SHIELD SOUTH CAROLINA	VP

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11183**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

Reattribute: To Robin D'Alessio

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS ROBIN H. D'ALESSIO**

Mailing Address 209 FETTERBUSH RD

City	State	Zip Code
ELGIN	SC	29045-9185

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BLUECROSS BLUE SHIELD OF SC	VP OF GOVERNMENT AFFAIRS

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11184**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

Reattribute: from James A. D'Alessio

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY D'AMATO**

Mailing Address 50 BAY AVENUE

City State Zip Code  
RONKONKOMA NY 11779-5422

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

Name of Employer Occupation  
EDELTA CONSULTING, INC. CONSULTANT, PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.5365**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. NICHOLAS J. DEIULIIS**

Mailing Address 1460 HOLLOW TREE DRIVE

City State Zip Code  
PITTSBURGH PA 15241-2920

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

Name of Employer Occupation  
CONSOL ENERGY ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.5473**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CAROL A. DENICHOLAS**

Mailing Address 10531 ETIWANDA AVE

City State Zip Code  
PORTER RANCH CA 91326-3113

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

Name of Employer Occupation  
MEDTRONIC CUSTOMER SERVICE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.5504**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
250.00

**Subtotal Of Receipts This Page** (optional).....▶ 1750.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**SARAH L. DYKES**

Mailing Address 4223 BRECKSVILLE RD

City	State	Zip Code
RICHFIELD	OH	44286-9457

FEC ID number of contributing federal political committee.

Name of Employer HGI	Occupation ADMINISTRATIVE ASSISTANT
-------------------------	--

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5702**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**DR. JOHN C. EASTMAN**

Mailing Address 840 E. 37TH ST.

City	State	Zip Code
LONG BEACH	CA	90807-4140

FEC ID number of contributing federal political committee.

Name of Employer CHAPMAN UNIVERSITY	Occupation LAW PROFESSOR
--	-----------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5708**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**LESLIE EDELMAN**

Mailing Address 55 JONES RD

City	State	Zip Code
ENGLEWOOD	NJ	07631-3731

FEC ID number of contributing federal political committee.

Name of Employer KIMBER MFG	Occupation PRESIDENT
--------------------------------	-------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5716**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="5400.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**LESLIE EDELMAN**

Mailing Address 55 JONES RD

City State Zip Code  
ENGLEWOOD NJ 07631-3731

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
KIMBER MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11189**

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2015

Redesignate: To General

Amount of Each Receipt this Period

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**LESLIE EDELMAN**

Mailing Address 55 JONES RD

City State Zip Code  
ENGLEWOOD NJ 07631-3731

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
KIMBER MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11190**

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARLAND MICHAEL EDWARDS**

Mailing Address 3533 WINDSOR DRIVE

City State Zip Code  
CHARLOTTE NC 28209-3357

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
STATE OF NORTH CAROLINA ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5726**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 40 / 185

(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**GERALD EDWARDS**

Mailing Address 11153 SANDY GROVE AVENUE

City State Zip Code  
LAS VEGAS NV 89144-1640

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
291.00

**Transaction ID : SA17A.5733**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**GARY ELKINS**

Mailing Address 1716 GENERAL PERSHING ST

City State Zip Code  
NEW ORLEANS LA 70115-4726

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

Name of Employer Occupation  
ELKINS PLC ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.5750**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**GARY ELKINS**

Mailing Address 1716 GENERAL PERSHING ST

City State Zip Code  
NEW ORLEANS LA 70115-4726

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

Name of Employer Occupation  
ELKINS PLC ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

**Transaction ID : SA17A.5751**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5500.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**GARY ELKINS**

Mailing Address 1716 GENERAL PERSHING ST

City	State	Zip Code
NEW ORLEANS	LA	70115-4726

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ELKINS PLC	ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11194**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

Redesignate: To General

Amount of Each Receipt this Period

**[MEMO ITEM]**

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

**GARY ELKINS**

Mailing Address 1716 GENERAL PERSHING ST

City	State	Zip Code
NEW ORLEANS	LA	70115-4726

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ELKINS PLC	ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11195**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2015			

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

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

**MRS. HELEN C. ENGLE**

Mailing Address P.O. BOX 114  
59 CHURCH STREET

City	State	Zip Code
TIMBLIN	PA	15778-0114

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5776**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALVIN J. ESTEVEZ**

Mailing Address 47 CRANBROOK

City AVON State CT Zip Code 06001-5124

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

Name of Employer ENIGMA SOFTWARE GROUP U.S.A., LLC Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11200**

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**NINA ESTEVEZ**

Mailing Address 47 CRANBROOK

City AVON State CT Zip Code 06001-5124

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.5820**

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. GERALD E. FELDMAN**

Mailing Address 42 SAINT GEORGE PLACE

City PALM BEACH GARDENS State FL Zip Code 33418-4025

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.5883**

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**Subtotal Of Receipts This Page** (optional).....▶ 3700.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 44 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS M. FERRARO JR.**

Mailing Address 54 FERRARO LN

City State Zip Code  
BUTLER PA 16002-9084

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5909**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ORLIE S. FERRETTI**

Mailing Address 147 LAKEWOOD ROAD

City State Zip Code  
GREENSBURG PA 15601-9784

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
KATTAN-FERRETTI INSURANCE INSURANCE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5911**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN J. FINK**

Mailing Address 11 SAND BAR DR.

City State Zip Code  
BAYVILLE NJ 08721-3547

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5922**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**JESSICA FISCHER**

Mailing Address 4106 W ROAD

City	State	Zip Code
SIGNAL MOUNTAIN	TN	37377-3204

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5944**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. KIM FISHER**

Mailing Address 4 ROCKINGHAM COURT

City	State	Zip Code
HEATH	TX	75032-6869

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5956**

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. KYLE FISHER**

Mailing Address 4 ROCKINGHAM COURT

City	State	Zip Code
HEATH	TX	75032-6869

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
K.E. ANDREWS & CO.	EXECUTIVE VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5958**

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NED N. FLEMING III**

Mailing Address 5420 L.B.J. FREEWAY  
TWO LINCOLN CENTRE, SUITE 1000  
City State Zip Code  
DALLAS TX 75240-6222

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SUNTX CAPITAL PARTNERS PRIVATE EQUITY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5978**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MS. FRANCINE FLOOD**

Mailing Address 1543 CENTRAL PARK AVENUE  
F-3  
City State Zip Code  
YONKERS NY 10710-6015

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MANHATTAN COLLEGE OFFICE MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5983**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MS. ELLEN HUNT FLOWERS**

Mailing Address 3608 MARQUETTE ST  
City State Zip Code  
DALLAS TX 75225-5125

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5987**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. JOHNNY FONTENOT**

Mailing Address 245 BLUE HERON

City State Zip Code  
HEATH TX 75032-7649

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MCGRIFF, SEIBELS & WILLIAMS EXECUTIVE VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.5995**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>
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**B. Full Name (Last, First, Middle Initial)**

**MS. JULIE FREDRICKSON**

Mailing Address 17031 POLK ST

City State Zip Code  
OMAHA NE 68135-3165

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HEAVENLY HOME SALES REAL ESTATE BROKER/SMALL BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6071**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			26			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**C. Full Name (Last, First, Middle Initial)**

**MR. FOSTER S. FRIESS**

Mailing Address P.O. BOX 9790

City State Zip Code  
JACKSON WY 83002-9790

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
FRIESS ASSOCIATES ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6085**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**Subtotal Of Receipts This Page (optional)**.....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 48 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LYNNETTE FRIESS**

Mailing Address PO BOX 9790

City JACKSON State WY Zip Code 83002-9790

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6087**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**J R GALLO**

Mailing Address 130 FIVE MILE RIVER ROAD

City DARIEN State CT Zip Code 06820-6236

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SEMI-RETIRED CPA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6131**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**J R GALLO**

Mailing Address 130 FIVE MILE RIVER ROAD

City DARIEN State CT Zip Code 06820-6236

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SEMI-RETIRED CPA

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6132**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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





**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD GASSER**

Mailing Address P.O. BOX 60004  
3511 STELLAR PLACE

City MIDLAND State TX Zip Code 79711-0004

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.6181**

Date of Receipt  
MM / DD / YYYY  
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD GASSER**

Mailing Address P.O. BOX 60004  
3511 STELLAR PLACE

City MIDLAND State TX Zip Code 79711-0004

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

**Transaction ID : SA17A.6182**

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
4400.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD GASSER**

Mailing Address P.O. BOX 60004  
3511 STELLAR PLACE

City MIDLAND State TX Zip Code 79711-0004

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11204**

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2015

Redesignate: To General

Amount of Each Receipt this Period  
-2700.00

**[MEMO ITEM]**

Subtotal Of Receipts This Page (optional).....▶ 5400.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD GASSER**

Mailing Address P.O. BOX 60004  
3511 STELLAR PLACE

City MIDLAND State TX Zip Code 79711-0004

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11205**

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**ERNEST GATEWOOD**

Mailing Address 300 CRANBERRY LANE

City MCKINNY State TX Zip Code 75071-2433

FEC ID number of contributing federal political committee.

Name of Employer JACKSON CLABURN, INC. Occupation VP

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6192**

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. DOMINIC GIGLIOTTI**

Mailing Address 11279 PERRY HWY

City WEYFORD State PA Zip Code 15090-9381

FEC ID number of contributing federal political committee.

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6238**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. REX GLENDENNING**

Mailing Address 12400 PRESTON ROAD STE. 100

City	State	Zip Code
FRISCO	TX	75033-6401

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
REX REAL ESTATE	OWNER/BROKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6286**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			17			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**NICHOLAS GOEDERS**

Mailing Address 3761 MALLARD BAY CIRCLE

City	State	Zip Code
SHREVEPORT	LA	71107-9359

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
LSU HEALTH SHREVEPORT	PROFESSOR AND HEAD

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6310**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
05			28			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**META GOINS**

Mailing Address 6434 WICHITA ROAD

City	State	Zip Code
THAYER	KS	66776-8126

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6316**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL J. GORMAN**

Mailing Address 403 N. INTERLACHEN AVENUE

City State Zip Code  
WINTER PARK FL 32789-3202

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6361**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH GOYETTE**

Mailing Address 100 LAKE DR

City State Zip Code  
STERLING VA 20164-8606

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
TALINO TECHNOLOGY CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6379**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MS. KATHLEEN A. GRAEVE**

Mailing Address 304 HIGH STREET

City State Zip Code  
NEOLA IA 51559-3078

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ST. THOMAS MORE SCHOOL TEACHER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6386**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A. Full Name (Last, First, Middle Initial)  
MRS. DIANA GRAND-LIENARD**

Mailing Address 7116 HUNT LANE

City State Zip Code  
ROCKWALL TX 75087-7011

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6400**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B. Full Name (Last, First, Middle Initial)  
MR. EDWARD GRAND-LIENARD**

Mailing Address 501 LOMA VISTA

City State Zip Code  
HEATH TX 75032-2018

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SPECUAL PRODUCTS &MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6402**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C. Full Name (Last, First, Middle Initial)  
MR. EDWARD GRAND-LIENARD**

Mailing Address 501 LOMA VISTA

City State Zip Code  
HEATH TX 75032-2018

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SPECUAL PRODUCTS &MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6403**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD GRAND-LIENARD**

Mailing Address 501 LOMA VISTA

City HEATH State TX Zip Code 75032-2018

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

Name of Employer Occupation  
SPECIAL PRODUCTS &MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11209**

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2015

Redesignate: To General

Amount of Each Receipt this Period  
-100.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD GRAND-LIENARD**

Mailing Address 501 LOMA VISTA

City HEATH State TX Zip Code 75032-2018

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

Name of Employer Occupation  
SPECIAL PRODUCTS &MFG PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11210**

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT J. GRAND-LIENARD III**

Mailing Address 7116 HUNT LANE

City ROCKWALL State TX Zip Code 75087-7011

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

Name of Employer Occupation  
SPECIAL PRODUCTS & MFG., INC. CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.6407**

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**Subtotal Of Receipts This Page** (optional).....▶ 500.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 57 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD S. GRIFFITH**

Mailing Address 3147 MILAM STREET

City State Zip Code  
HOUSTON TX 77006-3613

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6445**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. ALFRED B. GUINN**

Mailing Address 1111 7TH STREET

City State Zip Code  
WICHITA FALLS TX 76301-2301

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WALSH & WATTS, INC. OIL & GAS PRODUCTION

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6462**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS. MAUREEN M. GUTH**

Mailing Address 475 SOUTH BARRETT ROAD

City State Zip Code  
YUBA CITY CA 95991-5748

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
JOHN GUTH OFFICE MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6478**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JACQUES E. HAERINGER**

Mailing Address 412 SENECA ROAD

City	State	Zip Code
GREAT FALLS	VA	22066-1111

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
L'AUBERGE CHEZ FRANCOIS	CHIEF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6488**

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**MRS. JENNIFER MARIE HALE**

Mailing Address 10897 LAKE WINDERMERE DR.

City	State	Zip Code
GREAT FALLS	VA	22066-1529

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6510**

Date of Receipt

M M / D D / Y Y Y Y
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="1500.00"/>
--------------------------------------

**C.** Full Name (Last, First, Middle Initial)  
**FRANK HANNA**

Mailing Address 5 CONCOURSE PARKWAY NW  
SUITE 200

City	State	Zip Code
ATLANTA	GA	30328

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HANNA CAPTIAL	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11094**

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**SALLY HANNA**

Mailing Address **5 CONCOURSE PARKWAY NW  
SUITE 200**

City **ATLANTA** State **GA** Zip Code **30328**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**2700.00**

**Transaction ID : SA17A.11096**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 30 / 2015**

Amount of Each Receipt this Period  
**2700.00**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. NORA A. HARDING**

Mailing Address **2625 DISCOVERY BLVD.**

City **ROCKWALL** State **TX** Zip Code **75032-6226**

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

Name of Employer **S.P.M. SPECIAL PRODUCTS & MFG., INC.** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

**Transaction ID : SA17A.6574**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 15 / 2015**

CONTRIBUTION

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**MR. TY L. HARDING**

Mailing Address **2625 DISCOVERY BLVD.**

City **ROCKWALL** State **TX** Zip Code **75032-6226**

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

Name of Employer **CONSTRUCTION D.B.I.** Occupation **EXECUTIVE VICE PRESIDENT  
ESTIMATING**

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
**500.00**

**Transaction ID : SA17A.6578**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 15 / 2015**

CONTRIBUTION

Amount of Each Receipt this Period  
**500.00**

**Subtotal Of Receipts This Page** (optional)..... **3700.00**

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**DR. DONALD L. HARR**

Mailing Address 3010 WENDIMERE LANE

City: BILLINGS State: MT Zip Code: 59102-0948

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 Amount of Each Receipt this Period: 500.00

**Transaction ID : SA17A.6590**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
 500.00

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

**MR. RAYMOND G. HARRIES**

Mailing Address P.O. BOX 172

City: BALLY State: PA Zip Code: 19503-0172

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

Name of Employer: BALLY RIBBON MILLS Occupation: TEXTILES EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 Amount of Each Receipt this Period: 250.00

**Transaction ID : SA17A.6604**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 08 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
 250.00

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

**JUDITH HARVEY**

Mailing Address 9465 JACKSON CIRCLE

City: OMAHA State: NE Zip Code: 68114

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 Amount of Each Receipt this Period: 1000.00

**Transaction ID : SA17A.11102**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2015

Amount of Each Receipt this Period  
 1000.00

**Subtotal Of Receipts This Page** (optional).....▶ 1750.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**NELL HAWKINS**

Mailing Address 5305 HILLCREST DRIVE

City State Zip Code  
WACO TX 76710-1213

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11214**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

Redesignate: To General

Amount of Each Receipt this Period  
-1000.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**NELL HAWKINS**

Mailing Address 5305 HILLCREST DRIVE

City State Zip Code  
WACO TX 76710-1213

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11215**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

Redesignate: From Primary

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. HAZUCHA**

Mailing Address 4420 VANDERVORK AVENUE

City State Zip Code  
EDINA MN 55436-1431

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

Name of Employer Occupation  
PDI NINTH HOUSE PSYCHOLOGIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.6654**

Date of Receipt  
MM / DD / YYYY  
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**Subtotal Of Receipts This Page** (optional).....▶ 500.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. RICK HEIDEL**

Mailing Address 2829 WOODPATH LN

City	State	Zip Code
BEDFORD	TX	76021-2746

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ROCHESTER GAUGES	R. & D. ENGINEERING

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6683**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. RICK HEIDEL**

Mailing Address 2829 WOODPATH LN

City	State	Zip Code
BEDFORD	TX	76021-2746

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ROCHESTER GAUGES	R. & D. ENGINEERING

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6684**

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. JON PETER HENDRICKSON**

Mailing Address 6101 LONG PRAIRIE ROAD ST 744-244

City	State	Zip Code
FLOWER MOUND	TX	75028-6221

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	CONSTRUCTION

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6711**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 64 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LISA R. HENDRICKSON**

Mailing Address 6101 LONG PRAIRIE ROAD ST 744-244

City State Zip Code  
FLOWER MOUND TX 75028-6221

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6713**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**BILLY DON HENRY**

Mailing Address 6801 BALTIMORE DRIVE

City State Zip Code  
DALLAS TX 75205-1229

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MHBT, INC. CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6730**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**CRAIG HENRY**

Mailing Address 113 BROOKSHIRE GDNS

City State Zip Code  
LAFAYETTE LA 70503-5656

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6734**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

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

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







**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR RICHARD G. HITCHCOCK**

Mailing Address 409 MCCOOL AVENUE

City State Zip Code  
EAST SYRACUSE NY 13057-2223

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
540.00

**Transaction ID : SA17A.6803**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
540.00

**B.** Full Name (Last, First, Middle Initial)  
**JOHN HOGAN**

Mailing Address 531 CARRIAGE HOUSE LANE

City State Zip Code  
HARLEYSVILLE PA 19438-2530

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

Name of Employer Occupation  
INFO REQUESTED PER BEST EFFORT INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10832**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID L. HOLLINGER**

Mailing Address 755 WHITE OAK ROAD

City State Zip Code  
DENVER PA 17517-9106

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

Name of Employer Occupation  
FOUR SEASONS PRODUCE INC. CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.6840**

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

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5940.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MRS. DEBORAH HOLLINGER**

Mailing Address 755 WHITE OAK ROAD

City State Zip Code  
DENVER PA 17517-9106

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6842**

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

CONTRIBUTION

Amount of Each Receipt this Period

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

**MR. ANDREW C. HOOKER**

Mailing Address 211 LEUCK DR.

City State Zip Code  
COGAN STATION PA 17728-8105

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PENNRAM DIVERSIFIED MFG CORP MANAGER/OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6857**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

**MR. DONALD E. HOUSER**

Mailing Address P.O. BOX 45  
331 W. MAIN STREET

City State Zip Code  
LOCK HAVEN PA 17745-0045

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF-EMPLOYED INSURANCE AGENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6881**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEWIS C. HUDSON JR.**

Mailing Address 10208 PORTLAND ROAD

City State Zip Code  
SILVER SPRING MD 20901-2022

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6901**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**DENNIS HULL**

Mailing Address 2159 SHUBERT AVE

City State Zip Code  
HENDERSON NV 89052-5715

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6917**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES W. HUMRICHOUSE**

Mailing Address 8508 SAN FERNANDO WAY

City State Zip Code  
DALLAS TX 75218-4305

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.6923**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**LAMAR HUNT**

Mailing Address 1601 ELM STREET  
SUITE 4000

City DALLAS State TX Zip Code 75201

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11165**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Redesignate: To General 2016

Amount of Each Receipt this Period

<input type="text" value="-2700.00"/>
---------------------------------------

**[MEMO ITEM]**

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

**DR. FRANCIS X. HURLEY**

Mailing Address 113 CHARLESBERRY LANE

City CHAPEL HILL State NC Zip Code 27517-7903

FEC ID number of contributing federal political committee.

Name of Employer US ARMY Occupation SCIENCE MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11022**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>
--------------------------------------

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

**DR. FRANCIS X. HURLEY**

Mailing Address 113 CHARLESBERRY LANE

City CHAPEL HILL State NC Zip Code 27517-7903

FEC ID number of contributing federal political committee.

Name of Employer US ARMY Occupation SCIENCE MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11083**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

Amount of Each Receipt this Period

<input type="text" value="8.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. DONNA HUTCHINSON**

Mailing Address 780 CRESTVIEW COURT

City State Zip Code  
COPPELL TX 75019-6500

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

Name of Employer Occupation  
SELF EMPLOYED ARTIST & HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.6939**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN HUTCHINSON**

Mailing Address 780 CRESTVIEW COURT

City State Zip Code  
COPPELL TX 75019-6500

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.6941**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. VINCENZO ISOLDI**

Mailing Address 6200 CROWN COURT

City State Zip Code  
PRESTO PA 15142-1046

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.6980**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**Subtotal Of Receipts This Page** (optional).....▶ 5900.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID W. JOHNSON**

Mailing Address 2500 NORTH DALLAS PARKWAY STE. 600

City State Zip Code  
PLANO TX 75093-4820

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

Name of Employer Occupation  
AIMBRIDGE HOSPITALITY PRESIDENT & C.E.O.

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.7079**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS O. JOHNSON II**

Mailing Address 629 QUINCY LANE

City State Zip Code  
WEXFORD PA 15090-6835

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

Name of Employer Occupation  
CONSOL ENERGY EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.7122**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**KELLEY JOHNSTON**

Mailing Address P.O. BOX 121

City State Zip Code  
NEWTOWN SQUARE PA 19073-0121

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

Name of Employer Occupation  
CAMPBELL SOUP CO. CORPORATE EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2648.00

**Transaction ID : SA17A.10836**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2648.00

**Subtotal Of Receipts This Page** (optional).....▶ 6348.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM JONES**

Mailing Address 256 KEASEY RD.

City	State	Zip Code
CABOT	PA	16023

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PENN UNITED TECHNOLOGIES	TOOL & DIE MAKER/ PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7150**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		23		2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**DAVID L. JOYCE**

Mailing Address 3223 FOX HOLLOW CT SW

City	State	Zip Code
ROCHESTER	MN	55902-6620

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MAYO CLINIC	PHYSICIAN

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7161**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		11		2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. MACKEY KAHN**

Mailing Address 3347 166 STREET

City	State	Zip Code
FLUSHING	NY	11358-1409

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
DCAS	INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7173**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		15		2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEVE G. KANTELIOTIS**

Mailing Address 30 S. 17TH STREET, 20TH FLOOR

City	State	Zip Code
PHILADELPHIA	PA	19103-4002

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
WELLS FARGO ADVISORS	MANAGING DIRECTOR, INVESTMENTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7188**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**LIONEL KAPLAN**

Mailing Address 70 N MONTGOMERY ST

City	State	Zip Code
TRENTON	NJ	08608-1808

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
JOSEPH D. KAPLAN & SON, P.A.	ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7190**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**REPLOGLE KATHY**

Mailing Address 114415 FRONT BEACH RD.

City	State	Zip Code
PANAMA CITY BEACH	FL	32413

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CONFIDENTIAL	NURSE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7204**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

# SCHEDULE A-P ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MRS. MAURA E. KELLY**

Mailing Address 10420 PATRICIAN WOODS COURT

City	State	Zip Code
GREAT FALLS	VA	22066-2941

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

**Transaction ID : SA17A.7243**

Date of Receipt

M M / D D / Y Y Y Y
05 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 500.00
--------------

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

**MS. THERESA K. KELLY**

Mailing Address 145 95TH STREET, APT. D1

City	State	Zip Code
BROOKLYN	NY	11209-7241

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

**Transaction ID : SA17A.7245**

Date of Receipt

M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 500.00
--------------

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

**MELINDA A KIZER**

Mailing Address 9462 JACKSON CIRCLE

City	State	Zip Code
OMAHA	NE	68114

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

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

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

**Transaction ID : SA17A.11114**

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Receipt this Period

_____ 1000.00
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**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 2000.00

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



# SCHEDULE A-P ITEMIZED RECEIPTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEON I. KOLODZIEJSKI**

Mailing Address 1323 DORSEY AVENUE

City	State	Zip Code
ESSEX	MD	21221-3608

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7367**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="200.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR KOMISSOR**

Mailing Address 500 OAKRIDGE LANE

City	State	Zip Code
ALBERTSON	NY	11507-1529

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIRST CENTURY FUNDING	BROKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7373**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR KOMISSOR**

Mailing Address 500 OAKRIDGE LANE

City	State	Zip Code
ALBERTSON	NY	11507-1529

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIRST CENTURY FUNDING	BROKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7374**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MS. CHARMAINE H. KRAFT**

Mailing Address 529 BLAIR MEADOWS DRIVE

City State Zip Code  
GRAPEVINE TX 76051-4413

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7411**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**ERIC KRANTZ**

Mailing Address 10 N 565 MANCHESTER LANE

City State Zip Code  
ELGIN IL 60124

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PROVENA ST. JOSEPH HOSPITAL SECURITY AND TRANSPORTER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7427**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. KUELBS**

Mailing Address 611 S. WHITE CHAPEL ROAD

City State Zip Code  
SOUTHLAKE TX 76092-7318

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WORLD FACTORY C.E.O.

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7470**

Date of Receipt

/  /

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARY JUDITH KUESHNER**

Mailing Address 1572 BARR AVENUE

City State Zip Code  
PITTSBURGH PA 15205

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7472**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARY JUDITH KUESHNER**

Mailing Address 1572 BARR AVENUE

City State Zip Code  
PITTSBURGH PA 15205

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7473**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="50.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT E. KUHN**

Mailing Address 1961 LANDIS VALLEY ROAD

City State Zip Code  
LANCASTER PA 17601-5405

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
WELLS FARGO BANKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7475**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
05			06			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**BARRIE LAING**

Mailing Address 111 FISHSPEAR LANE

City State Zip Code  
GEORGETOWN TX 78628

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RDC, INC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7511**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 23 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**DR KATHLEEN G. LAMB**

Mailing Address 2548 BARNWOOD DR

City State Zip Code  
WEXFORD PA 15090-7973

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PEDIATRIC ALLIANCE PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7523**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MS. WENDY LYNN LAMBRECHT**

Mailing Address 1021 N. GARDEN STREET  
APARTMENT 208

City State Zip Code  
NEW ULM MN 56073-1560

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ST JOHN'S LUTHERAN CHURCH ACCOUNTING/BOOKKEEPING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7531**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

PAGE 82 / 185

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. GARY M. LANZARA**

Mailing Address 544 SPRINGVAL ROAD

City State Zip Code  
GREAT FALLS VA 22066-3427

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7549**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. MICHAEL LAWLER**

Mailing Address 13424 PAUL STREET

City State Zip Code  
OMAHA NE 68154-5268

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7583**

Date of Receipt

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

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. CHARLES R. LEFEVER**

Mailing Address 1506 CENTER ROAD

City State Zip Code  
LANCASTER PA 17603-4732

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
O.L.M., INC. SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7617**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID LEJEUNE**

Mailing Address 1303 STAMFORD WAY

City	State	Zip Code
RESTON	VA	20194-1315

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

Name of Employer	Occupation
GLOBAL TECHNICAL SERVICES LLC	MANAGING PARTNER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.7638**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARIE-ANGE LEJEUNE**

Mailing Address 1303 STAMFORD WAY

City	State	Zip Code
RESTON	VA	20194-1315

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.7640**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**KOK SIEM LEUNG**

Mailing Address 2128 CARRIAGE LN

City	State	Zip Code
CLEARWATER	FL	33765-2151

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

Name of Employer	Occupation
ENIGMA SOFTWARE	EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.7659**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 8100.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK LEWIS JR.**

Mailing Address 514 GREENBRIAR CT

City State Zip Code  
STILLWATER OK 74075-1634

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LAND RUN REALTY COMMERCIAL REALTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7669**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MS. PATRICIA ANN LIEBMAN**

Mailing Address 119 BERWYN ROAD

City State Zip Code  
PITTSBURGH PA 15237-2803

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7684**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS F. LINNEN SR.**

Mailing Address 404 CLEARWATER DRIVE

City State Zip Code  
PONTE VEDRA FL 32082-4170

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7707**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS F. LINNEN SR.**

Mailing Address 404 CLEARWATER DRIVE

City State Zip Code  
PONTE VEDRA FL 32082-4170

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7708**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			22			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**TANYA LITTLE**

Mailing Address 6333 MOCKINGBIRD

City State Zip Code  
DALLAS TX 75214-2692

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7718**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**MS. KATHLEEN L. LOMAX**

Mailing Address 1601 S. SANDHILL ROAD UNIT 216

City State Zip Code  
LAS VEGAS NV 89104-4735

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7750**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="600.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD MARAGNI**

Mailing Address P.O. BOX 1905

City State Zip Code  
LIVINGSTON NJ 07039-7505

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ROMAN ASPHALT CORP. ACCOUNTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7885**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES MARCOLINI**

Mailing Address 5316 SW 3RD AVENUE

City State Zip Code  
CAPE CORAL FL 33914-7120

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.7891**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**DAVID MARIEN**

Mailing Address 16434 HERRIMAN BLVD

City State Zip Code  
NOBLESVILLE IN 46060-5415

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFO REQUESTED PER BEST EFFORT INFORMATION REQUESTED PER BEST EFFORT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10840**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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





**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**KENT M MARTIN**

Mailing Address 1690 READING ROAD

City State Zip Code  
MOHNTON PA 19540

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

Name of Employer Occupation  
SIGNATURE CUSTOM CABINetry PRESIDENT/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.11168**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Reattribute: To Cynthia Martin

Amount of Each Receipt this Period  
-2700.00

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT MAXEY**

Mailing Address 4809 SCHOONER COURT

City State Zip Code  
FLOWER MOUND TX 75022-5474

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

Name of Employer Occupation  
METROCOM PROPERTIES REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.7982**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 05 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. BEVERLY D. MAY**

Mailing Address 6223 STONEHILL DRIVE

City State Zip Code  
DALLAS TX 75254-7835

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.7988**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**Subtotal Of Receipts This Page** (optional).....▶ 1000.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARIA L. MCCracken**

Mailing Address 130 8TH STREET

City BRIDGEPORT State PA Zip Code 19405-1202

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
540.00

**Transaction ID : SA17A.8062**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
540.00

**B.** Full Name (Last, First, Middle Initial)  
**MS. BEHJAL MCELROY**

Mailing Address 5614 DEL ROY

City DALLAS State TX Zip Code 75230-2964

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

Name of Employer NEW SYNERGY HOMES Occupation BUILDER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

**Transaction ID : SA17A.8084**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. DEBY GAY MERRIMAN**

Mailing Address 300 N. FIELD STREET

City DALLAS State TX Zip Code 75202-2705

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

Name of Employer MERRIMAN ASSOCIATES Occupation VICE PRESIDENT HR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.8173**

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5740.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. JERRY MERRIMAN**

Mailing Address 300 N. FIELD STREET

City State Zip Code  
DALLAS TX 75202-2705

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MERRIMAN ASSOCIATES/ARCHITECTS, INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8175**

Date of Receipt

/  /

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR DANIEL P. MEUSER**

Mailing Address 100 OLDFIELD RD

City State Zip Code  
SHAVERTOWN PA 18708-9420

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PRIDE MOBILITY CORP EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8191**

Date of Receipt

/  /

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR DANIEL P. MEUSER**

Mailing Address 100 OLDFIELD RD

City State Zip Code  
SHAVERTOWN PA 18708-9420

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PRIDE MOBILITY CORP EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8192**

Date of Receipt

/  /

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES MEYER**

Mailing Address 6520 W 89TH ST APT 139

City OVERLAND PARK State KS Zip Code 66212-6092

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

Name of Employer DEY DISTRIBUTING Occupation SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
210.00

**Transaction ID : SA17A.8209**

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
35.00

**B.** Full Name (Last, First, Middle Initial)  
**JAMES MEYER**

Mailing Address 6520 W 89TH ST APT 139

City OVERLAND PARK State KS Zip Code 66212-6092

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

Name of Employer DEY DISTRIBUTING Occupation SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
310.00

**Transaction ID : SA17A.8210**

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES MEYER**

Mailing Address 6520 W 89TH ST APT 139

City OVERLAND PARK State KS Zip Code 66212-6092

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

Name of Employer DEY DISTRIBUTING Occupation SALES

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
335.00

**Transaction ID : SA17A.8211**

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
25.00

**Subtotal Of Receipts This Page** (optional).....▶ 160.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**DON MEZIERE**

Mailing Address 2530 ROYAL VIEW RD

City State Zip Code  
ESCONDIDO CA 92027-4756

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED MACHINIST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8220**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			23			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="250.00"/>
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**B.** Full Name (Last, First, Middle Initial)

**MR. STEVEN G. MIHAYLO**

Mailing Address P.O. BOX 19790

City State Zip Code  
RENO NV 89511-2471

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
IMERCHANT CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8238**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**C.** Full Name (Last, First, Middle Initial)

**WILLIAM P. MILLS, III**

Mailing Address P.O. BOX 52592

City State Zip Code  
LAFAYETTE LA 70505-2592

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MPW ENTERPRISE MANAGING MEMBER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8278**

Date of Receipt

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

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2500.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. LARRY R. MINNIEAR**

Mailing Address 1401 HIGHCREST CT

City State Zip Code  
HIXSON TN 37343-4320

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.8298**

Date of Receipt

**06 / 22 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

100.00

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

**EUSTACE MITA**

Mailing Address 2224 E DEERFIELD DR

City State Zip Code  
MEDIA PA 19063-1834

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

Name of Employer Occupation  
MITA MANAGEMENT CHAIRMAN/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.8308**

Date of Receipt

**06 / 29 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

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

**MRS. SUSANNE MITA**

Mailing Address 2224 E DEERFIELD

City State Zip Code  
MEDIA PA 19063-1834

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.8310**

Date of Receipt

**06 / 29 / 2015**

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page (optional)**.....▶ **5500.00**

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**RIGG MOHLER**

Mailing Address 10108 CAPTAIN HICKORY PL

City State Zip Code  
GREAT FALLS VA 22066-2530

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

Name of Employer Occupation  
INNOVATIVE BIOSENSORS EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.8334**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
500.00

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

**MR. CARLYLE N. MONTANYE JR.**

Mailing Address P.O. BOX 14

City State Zip Code  
GLYNDON MD 21071-0014

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.8350**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
300.00

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

**DENISE MONTGOMERY**

Mailing Address 502 CROWN PASSAGE DR

City State Zip Code  
SAINT CHARLES MO 63303-6293

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.8355**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 28 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
350.00

**Subtotal Of Receipts This Page (optional)**.....▶ 1150.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BLANCHE H. MOORE**

Mailing Address 735 POTOMAC RIVER ROAD

City State Zip Code  
MCLEAN VA 22102-1430

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8365**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ANN M. MORAN**

Mailing Address 771 SUPPLEE MILL RD

City State Zip Code  
LEWISBURG PA 17837-8171

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8388**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANN M. MORAN**

Mailing Address 771 SUPPLEE MILL RD

City State Zip Code  
LEWISBURG PA 17837-8171

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11219**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2015

Reattribute: To John Moran

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. MORAN JR.**

Mailing Address 771 SUPPLEE MILL RD

City	State	Zip Code
LEWISBURG	PA	17837-8171

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MORAN INDUSTRIES, LLC	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11220**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

Reattribute: From Ann Moran

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**PATRICK MORGANELLI**

Mailing Address 6 DOWNEY PL

City	State	Zip Code
OAKLAND	CA	94610-1809

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8400**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			16			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA J. MUELLER**

Mailing Address 380 EDISON DR.

City	State	Zip Code
VERMILION	OH	44089-3642

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8437**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DICK MULLER**

Mailing Address 505 S. 93RD AVENUE

City OMAHA State NE Zip Code 68114-5015

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

Name of Employer RHODEN MOTOR COMPANIES Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.8445**

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS S. MULLIKIN**

Mailing Address 1729 FAIR ST

City CAMDEN State SC Zip Code 29020-2718

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.8451**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. VIRGINIA ANN MULLIKIN**

Mailing Address 1729 FAIR ST

City CAMDEN State SC Zip Code 29020-2718

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.8453**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 6400.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. TIMOTHY NELSON**

Mailing Address 69 ARDMORE AVENUE

City LANSDOWNE State PA Zip Code 19050-1803

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

Name of Employer TRAVELERS INSURANCE Occupation UNDERWRITER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.8545**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 26 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

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

**MR. WILLIAM J. O'CONNOR**

Mailing Address 315 LOCUST ROAD

City BADEN State PA Zip Code 15005-2521

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.8657**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 27 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

500.00

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

**DORAN OANCIA**

Mailing Address 505 RANGEVIEW DRIVE

City LITTLETON State CO Zip Code 80120-4000

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

Name of Employer NGL ENERGY PARTNERS, LP Occupation ENERGY EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.8681**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 05 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**Subtotal Of Receipts This Page** (optional).....▶ 1000.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD OCHYLSKI**

Mailing Address 100 SEAWAY COURT

City State Zip Code  
VERO BEACH FL 32963-2735

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

**Transaction ID : SA17A.8691**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT OLSON**

Mailing Address 6414 DELOACHE AVENUE

City State Zip Code  
DALLAS TX 75225-2605

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

Name of Employer Occupation  
SELF EMPLOYED OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.8709**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA ORANGE**

Mailing Address 2566 N. MCCORD ROAD

City State Zip Code  
TOLEDO OH 43615-2448

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

Name of Employer Occupation  
A.R.C.A. OFFICIAL

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

**Transaction ID : SA17A.8711**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 31 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
300.00

**Subtotal Of Receipts This Page** (optional).....▶ 3300.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA ORANGE**

Mailing Address 2566 N. MCCORD ROAD

City TOLEDO State OH Zip Code 43615-2448

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

Name of Employer Occupation  
A.R.C.A. OFFICIAL

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
408.00

**Transaction ID : SA17A.8712**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
108.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES E. OSKIN**

Mailing Address 4350 MILLFAIR ROAD

City FAIRVIEW State PA Zip Code 16415-2248

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
540.00

**Transaction ID : SA17A.8729**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
540.00

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARY C. PAGE**

Mailing Address 8020 CAPTAINS COURT

City FREDERICK State MD Zip Code 21701-9330

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

Name of Employer Occupation  
FREDERICK SURGICAL CENTER REGISTERED NURSE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.8745**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**Subtotal Of Receipts This Page** (optional).....▶ 1148.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LOUIS J. PANZA JR.**

Mailing Address 1163 COUNTRY CLUB RD

City	State	Zip Code
MONONGAHELA	PA	15063-1013

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MONOGAHELA VALLEY HOSPITAL	PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8763**

Date of Receipt

M M / D D / Y Y Y Y
05 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE A. PARMER**

Mailing Address 911 GROVE ROAD

City	State	Zip Code
HARRISBURG	PA	17111-4674

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FULTON BANK	DIRECTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8776**

Date of Receipt

M M / D D / Y Y Y Y
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="540.00"/>
-------------------------------------

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD PAYNE**

Mailing Address 900 EAST WORTH DR

City	State	Zip Code
GRAPEVINE	TX	76051-3659

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PELTON LAND SOLUTIONS	VP

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8807**

Date of Receipt

M M / D D / Y Y Y Y
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ALICE PELLICCIOTTI**

Mailing Address 2511 BIRCHTREE DRIVE

City	State	Zip Code
GERMANTOWN	TN	38138-5703

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
STABLIT AMERICA, INC.	SUPERVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8823**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			08			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL PELLINI**

Mailing Address 32431 MEDITERRANEAN DRIVE

City	State	Zip Code
DANA POINT	CA	92629-3514

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CLARIENT INC	PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10844**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**GENE E. PHILLIPS**

Mailing Address 12895 JOSEY LANE #124-440

City	State	Zip Code
FARMERS BRANCH	TX	75234-8301

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PILLAR INCOME ASSET MANAGEMENT	ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8873**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**BENJAMIN POGUE**

Mailing Address 6409 CARMEL FALLS CT

City	State	Zip Code
MCKINNEY	TX	75070-8769

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8928**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MS. JUDY LYNN POGUE**

Mailing Address 3550 FM 543

City	State	Zip Code
MCKINNEY	TX	75071-7964

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	CO-OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8930**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. PAUL H. POGUE**

Mailing Address 1512 BRAY CENTRAL DRIVE STE 300

City	State	Zip Code
MCKINNEY	TX	75069-8267

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8932**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			01			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. PAUL H. POGUE**

Mailing Address 1512 BRAY CENTRAL DRIVE STE 300

City	State	Zip Code
MCKINNEY	TX	75069-8267

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8933**

Date of Receipt

M M / D D / Y Y Y Y
06 / 01 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**B.** Full Name (Last, First, Middle Initial)

**MR. PAUL H. POGUE**

Mailing Address 1512 BRAY CENTRAL DRIVE STE 300

City	State	Zip Code
MCKINNEY	TX	75069-8267

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8934**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="1700.00"/>
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**C.** Full Name (Last, First, Middle Initial)

**MR. PAUL H. POGUE**

Mailing Address 1512 BRAY CENTRAL DRIVE STE 300

City	State	Zip Code
MCKINNEY	TX	75069-8267

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11225**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

Redesignate: To General

Amount of Each Receipt this Period

<input type="text" value="-100.00"/>
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**[MEMO ITEM]**

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL H. POGUE**

Mailing Address 1512 BRAY CENTRAL DRIVE STE 300

City	State	Zip Code
MCKINNEY	TX	75069-8267

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
POGUE CONSTRUCTION	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11226**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MS. MARIA K. POIRIER**

Mailing Address 2128 ALICE LN SW

City	State	Zip Code
ROCHESTER	MN	55902-4237

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MAYO CLINIC	PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8941**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
05			14			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARIA K. POIRIER**

Mailing Address 2128 ALICE LN SW

City	State	Zip Code
ROCHESTER	MN	55902-4237

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
MAYO CLINIC	PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8940**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARIA K. POIRIER**

Mailing Address 2128 ALICE LN SW

City State Zip Code  
ROCHESTER MN 55902-4237

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MAYO CLINIC PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8942**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MS. MARIA K. POIRIER**

Mailing Address 2128 ALICE LN SW

City State Zip Code  
ROCHESTER MN 55902-4237

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MAYO CLINIC PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8943**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**JOE POWERS**

Mailing Address 1203 2ND STREET SW

City State Zip Code  
ROCHESTER MN 55902-1941

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
POWERS VENTURES INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.8976**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL RADOVANOVIC**

Mailing Address 3723 BENERAID ST

City State Zip Code  
LAND O LAKES FL 34638-7921

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9028**

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MRS. DAWN BARCLAY RANDOLPH**

Mailing Address 1631 E LETTS RD

City State Zip Code  
MIDLAND MI 48642-9468

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

Name of Employer Occupation  
LIVING WORD CHURCH MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
280.00

**Transaction ID : SA17A.9067**

Date of Receipt  
MM / DD / YYYY  
06 / 20 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**JAMES RANDOLPH**

Mailing Address 1631 E LET'S RD

City State Zip Code  
MIDLAND MI 48642

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

Name of Employer Occupation  
MARK BARCLAY MIN PR MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
280.00

**Transaction ID : SA17A.9069**

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
100.00

**Subtotal Of Receipts This Page** (optional).....▶ 2900.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**BARRY RICH**

Mailing Address 308 KINGS LAKE

City State Zip Code  
MCKINNEY TX 75070

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

Name of Employer Occupation  
RMPX CONSTRUCTION OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.9165**

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**SHAWN RICHARD**

Mailing Address 201 ST. CHARLES AVENUE

City State Zip Code  
NEW ORLEANS LA 70170-1000

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

Name of Employer Occupation  
ELKINS, PLC ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9174**

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KERESA RICHARDSON**

Mailing Address 200 FALLING WATER DRIVE

City State Zip Code  
MCKINNEY TX 75070-8776

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

Name of Employer Occupation  
LAWTON GROUP CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

**Transaction ID : SA17A.9167**

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2000.00

**Subtotal Of Receipts This Page** (optional).....▶ 5200.00

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





**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MRS. KAREN B. ROGAN**

Mailing Address 27 S. SEWARD STREET

City YORK State PA Zip Code 17404-5431

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
540.00

**Transaction ID : SA17A.9253**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 03 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

540.00

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

**MR. ROBERT ROMO**

Mailing Address 17612 IVY HILL DRIVE

City DALLAS State TX Zip Code 75287-7561

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

Name of Employer M/I HOMES OF DFW, LLC Occupation HOMEBUILDING EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9267**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

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

**MR. BRADLEY B. ROOT**

Mailing Address 107 GLEN HAVEN LN

City PITTSBURGH State PA Zip Code 15238-2203

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

Name of Employer NATIONAL CHARACTER EDUCATION FOUNDATION Occupation EXECUTIVE/BOARD MEMBER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

**Transaction ID : SA17A.9273**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 23 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

250.00

**Subtotal Of Receipts This Page (optional)**.....▶ 3490.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRADLEY B. ROOT**

Mailing Address 107 GLEN HAVEN LN

City State Zip Code  
PITTSBURGH PA 15238-2203

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NATIONAL CHARACTER EDUCATION FOUNDATION EXECUTIVE/BOARD MEMBER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9274**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. RUTHY ROSEBERG**

Mailing Address 12124 MADELEINE CIRCLE

City State Zip Code  
DALLAS TX 75230-2255

FEC ID number of contributing federal political committee.

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9276**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN ROSEBERG**

Mailing Address 12124 MADELEINE CIRCLE

City State Zip Code  
DALLAS TX 75230-2255

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SPR. PACKAGING EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9278**

Date of Receipt  
M M / D D / Y Y Y Y

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**GREG ROTHMAN**

Mailing Address 1 GUNPOWDER ROAD

City State Zip Code  
MECHANICSBURG PA 17050-7338

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

Name of Employer Occupation  
RSR REALTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1050.00

**Transaction ID : SA17A.11092**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS E. RUNYON**

Mailing Address 1120 POTTER ROAD

City State Zip Code  
PARK RIDGE IL 60068-1602

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

Name of Employer Occupation  
SEEDBURO EQUIPMENT BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
540.00

**Transaction ID : SA17A.9333**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
540.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS E. RUNYON**

Mailing Address 1120 POTTER ROAD

City State Zip Code  
PARK RIDGE IL 60068-1602

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

Name of Employer Occupation  
SEEDBURO EQUIPMENT BUSINESS OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
690.00

**Transaction ID : SA17A.9334**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
150.00

**Subtotal Of Receipts This Page** (optional).....▶ 1690.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**THOMAS SACKIE**

Mailing Address 12323 ROCHESTER DR

City State Zip Code  
FAIRFAX VA 22030-6324

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9372**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**SHELLY SAEMAN**

Mailing Address 720 S ELIZABETH ST

City State Zip Code  
DENVER CO 80209-4713

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9378**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 28 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**MR. ORLANDO SALAZAR**

Mailing Address 4445 ARCADY AVENUE

City State Zip Code  
DALLAS TX 75205-3604

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

Name of Employer Occupation  
SELF EMPLOYED OWNER/PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

**Transaction ID : SA17A.9386**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 06 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
1000.00

**Subtotal Of Receipts This Page (optional)**.....▶ 6400.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**WILLIAM SANDLIN**

Mailing Address 504 VICKSBURG WAY

City SOUTHLAKE State TX Zip Code 76092-9369

FEC ID number of contributing federal political committee.

Name of Employer SANDLIN CAPITAL Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9405**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			02			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="2700.00"/>
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**B.** Full Name (Last, First, Middle Initial)

**MRS. CATHERINE SANTORUM**

Mailing Address 7870 A1A S. UNIT 320

City SAINT AUGUSTINE State FL Zip Code 32080-8230

FEC ID number of contributing federal political committee.

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9419**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>
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**C.** Full Name (Last, First, Middle Initial)

**DAN SANTORUM**

Mailing Address 26 HARLESTON GREEN

City HILTON HEAD State SC Zip Code 29928-4225

FEC ID number of contributing federal political committee.

Name of Employer PTR Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9421**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

**CONTRIBUTION**

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MRS. MELISSA SANTORUM**

Mailing Address 26 HARLESTON GRN

City State Zip Code  
HILTON HEAD ISLAND SC 29928-4225

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
PALMELTO ELECTRIC EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9429**

Date of Receipt  
M M / D D / Y Y Y Y

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MS. JANE B. SARRA**

Mailing Address 100 MEDICAL BLVD.

City State Zip Code  
CANONSBURG PA 15317-9762

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CANONSBURG HOSPITAL PRESIDENT & CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9435**

Date of Receipt  
M M / D D / Y Y Y Y

**CONTRIBUTION**

Amount of Each Receipt this Period

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

**MR. WILLIAM M. SCAGLIONE**

Mailing Address 10 BEDFORD TER

City State Zip Code  
MANTUA NJ 08051-1741

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9460**

Date of Receipt  
M M / D D / Y Y Y Y

**CONTRIBUTION**

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. JOHN F. SCALO**

Mailing Address 1140 MERIDIAN DRIVE

City	State	Zip Code
PRESTO	PA	15142-1030

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
BURNS & SCALO ROOFING	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9468**

Date of Receipt

M M / D D / Y Y Y Y
05 / 27 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

**MR. PHILIP SCHAEFER**

Mailing Address 1924 NEWBURG ROAD

City	State	Zip Code
LOUISVILLE	KY	40205-1424

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SACRED HEART RETREAT	PRIEST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9473**

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

**MS. ZITA SCHIRGER**

Mailing Address 3801 MEADOW RIDGE DRIVE SW

City	State	Zip Code
ROCHESTER	MN	55902-6636

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9489**

Date of Receipt

M M / D D / Y Y Y Y
05 / 14 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**TRENT SCHUKOW**

Mailing Address 24 PRESIDENTS PL

City State Zip Code  
CARSELDINE ME 04034-0001

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9530**

Date of Receipt  
MM / DD / YYYY  
06 / 16 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. VICTOR F. SELLIER**

Mailing Address 3 CLARK BRANCH ROAD

City State Zip Code  
GREAT FALLS VA 22066-4157

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9596**

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**MRS. WENDELA P. SELLIER**

Mailing Address 3 CLARKS BRANCH ROAD

City State Zip Code  
GREAT FALLS VA 22066-4157

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9598**

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 8100.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**NADEEM R. SHAIKH**

Mailing Address 1 CHASE PLAZA 36TH FLOOR

City State Zip Code  
NEW YORK NY 10005

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.9627**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**MR. JEFF D. SHEETS**

Mailing Address 5530 PINEWOOD ROAD #37064

City State Zip Code  
FRANKLIN TN 37064-9207

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

Name of Employer Occupation  
ECHOLIGHT STUDIOS PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

**Transaction ID : SA17A.9654**

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**MR. JEFF D. SHEETS**

Mailing Address 5530 PINEWOOD ROAD #37064

City State Zip Code  
FRANKLIN TN 37064-9207

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

Name of Employer Occupation  
ECHOLIGHT STUDIOS PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11230**

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2015

Redesignate: To General

Amount of Each Receipt this Period  
-100.00

**[MEMO ITEM]**

**Subtotal Of Receipts This Page (optional)**.....▶ 5400.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. JEFF D. SHEETS**

Mailing Address 5530 PINWOOD ROAD #37064

City	State	Zip Code
FRANKLIN	TN	37064-9207

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
ECHOLIGHT STUDIOS	PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11231**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

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

**NATHAN SHEETS**

Mailing Address 10740 BIG HORN TRL

City	State	Zip Code
FRISCO	TX	75035-6630

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
NATURE NATES	OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9658**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

**MS. PATTY H. SHEETS**

Mailing Address 10740 BIG HORN TRL

City	State	Zip Code
FRISCO	TX	75035-6630

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9660**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY W. SHIRLEY**

Mailing Address 3708 SARAH SPRINGS TRL

City State Zip Code  
FLOWER MOUND TX 75022-6156

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

Name of Employer Occupation  
CENTURION AMERICAN EXECUTIVE VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5400.00

**Transaction ID : SA17A.9672**

Date of Receipt

**MM / DD / YYYY**  
06 / 10 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

5400.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY W. SHIRLEY**

Mailing Address 3708 SARAH SPRINGS TRL

City State Zip Code  
FLOWER MOUND TX 75022-6156

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

Name of Employer Occupation  
CENTURION AMERICAN EXECUTIVE VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.11235**

Date of Receipt

**MM / DD / YYYY**  
06 / 10 / 2015

Reattribute: To Kathryn Shirley

Amount of Each Receipt this Period

-2700.00

**C.** Full Name (Last, First, Middle Initial)  
**KATHRYN SHIRLEY**

Mailing Address 3708 SARAH SPRINGS TRL

City State Zip Code  
FLOWER MOUND TX 75022-6156

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.11236**

Date of Receipt

**MM / DD / YYYY**  
06 / 10 / 2015

Reattribute: From Jeffrey Shirley

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5400.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A. Full Name (Last, First, Middle Initial)  
MR. WALTER B. SIMMONS JR.**

Mailing Address 1212 NOCONA DRIVE

City MCKINNEY State TX Zip Code 75071-0489

FEC ID number of contributing federal political committee.

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9704**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B. Full Name (Last, First, Middle Initial)  
MR. DANNY SKARDA**

Mailing Address 7904 PATRIOT DRIVE

City AMARILLO State TX Zip Code 79119-6271

FEC ID number of contributing federal political committee.

Name of Employer HERRING BANK Occupation PRESIDENT/CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9729**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 11 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C. Full Name (Last, First, Middle Initial)  
MS. VIRGINIA A. SNIEGON**

Mailing Address 5901 MOUNT EAGLE DRIVE APT. 1402

City ALEXANDRIA State VA Zip Code 22303-2511

FEC ID number of contributing federal political committee.

Name of Employer IDA Occupation National Strategy

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.9794**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 02 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**COLORADO STARK**

Mailing Address 67-43 LOUBET ST

City	State	Zip Code
FOREST HILLS	NY	11375-5731

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

Name of Employer ENIGMA SOFTWARE	Occupation EXECUTIVE
-------------------------------------	-------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.9909**

Date of Receipt

M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 2700.00
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**B.** Full Name (Last, First, Middle Initial)  
**REID STEIN**

Mailing Address 5824 WILLIAMSTOWN ROAD

City	State	Zip Code
DALLAS	TX	75230-2134

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

Name of Employer MALABAR CAPITAL	Occupation INVESTMENT MANAGER
-------------------------------------	----------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.9926**

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 2700.00
---------------

**C.** Full Name (Last, First, Middle Initial)  
**SHELDON STEIN**

Mailing Address 9338 MEADOWBROOK DR.

City	State	Zip Code
DALLAS	TX	75220-2250

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

Name of Employer GLAZERS INC.	Occupation PRESIDENT & CEO
----------------------------------	-------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 2700.00

**Transaction ID : SA17A.9928**

Date of Receipt

M M / D D / Y Y Y Y
06 / 21 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

_____ 2700.00
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**Subtotal Of Receipts This Page** (optional).....▶ \_\_\_\_\_ 8100.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**EDWIN S TAYLOR**

Mailing Address 427 GREENBRIAR LANE

City State Zip Code  
CHARLESTON SC 29412

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11152**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period

<input type="text" value="1000.00"/>
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**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL TERNEUS**

Mailing Address 910 VANNORNAM PLACE

City State Zip Code  
BELLEVUE NE 68005

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
DEPARTMENT OF DEFENSE IT MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11124**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period

<input type="text" value="300.00"/>
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**C.** Full Name (Last, First, Middle Initial)  
**RICHARD TODD**

Mailing Address 15491 E PRENTICE DR

City State Zip Code  
CENTENNIAL CO 80015-4271

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INNOVEST CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10155**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
06			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="500.00"/>
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**Subtotal Of Receipts This Page** (optional).....

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MR. PATRICK TRASK**

Mailing Address 18166 SMITHVILLE ROAD

City	State	Zip Code
WASTA	SD	57791-3602

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	RANCHING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10196**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="300.00"/>
-------------------------------------

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

**BENJAMIN TRIBUANI**

Mailing Address 3152 MILLER ST

City	State	Zip Code
PHILADELPHIA	PA	19134-5122

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PHILADELPHIA PARKING AUTHORITY	INVENTORY MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10205**

Date of Receipt

M M / D D / Y Y Y Y
05 / 28 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
-------------------------------------

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

**BENJAMIN TRIBUANI**

Mailing Address 3152 MILLER ST

City	State	Zip Code
PHILADELPHIA	PA	19134-5122

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PHILADELPHIA PARKING AUTHORITY	INVENTORY MANAGER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10206**

Date of Receipt

M M / D D / Y Y Y Y
06 / 17 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

<input type="text" value="100.00"/>
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**Subtotal Of Receipts This Page (optional)**.....

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**BENJAMIN TRIBUIANI**

Mailing Address 3152 MILLER ST

City	State	Zip Code
PHILADELPHIA	PA	19134-5122

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
PHILADELPHIA PARKING AUTHORITY	INVENTORY MANAGER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 466.00

**Transaction ID : SA17A.10207**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

CONTRIBUTION

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
**KENNY A TROUTT**

Mailing Address 10596 STRAIT LANE

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

**Transaction ID : SA17A.11156**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**LISA A TROUTT**

Mailing Address 10596 STRAIT LANE

City	State	Zip Code
DALLAS	TX	75229

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 2700.00

**Transaction ID : SA17A.11158**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2015			

Amount of Each Receipt this Period  
 2700.00

**Subtotal Of Receipts This Page** (optional).....  5500.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GIUSEPPE VACCARO**

Mailing Address 31-25 NEWTOWN AVENUE

City	State	Zip Code
ASTORIA	NY	11102-1350

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF-EMPLOYED	REAL ESTATE

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10256**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN J. VERBANAC**

Mailing Address P.O. BOX 2492

City	State	Zip Code
CRANBERRY TOWNSHIP	PA	16066-1492

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SUMMA DEVELOPMENT	CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10323**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
05			27			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**TIM VON DOHLEN**

Mailing Address 8712 CAPEHART COVE

City	State	Zip Code
AUSTIN	TX	78733-3260

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SELF EMPLOYED	INVESTMENTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10371**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			09			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**BRANTLEY WALCH**

Mailing Address 14752 MAROON BELLS LN

City State Zip Code  
FRISCO TX 75035-0263

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10390**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**MELISSA WALCH**

Mailing Address 14752 MAROON BELLS LN

City State Zip Code  
FRISCO TX 75035-0263

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

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

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10392**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
2700.00

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

**MR. LOUIS H. WEISS**

Mailing Address 2975 BEECHWOOD BLVD

City State Zip Code  
PITTSBURGH PA 15217-3159

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

Name of Employer Occupation  
WESSLINES CARPET SALESMAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
360.00

**Transaction ID : SA17A.10483**

Date of Receipt  
MM / DD / YYYY  
05 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period  
360.00

**Subtotal Of Receipts This Page (optional)**.....▶ 5760.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS D. WHEAT**

Mailing Address 2006 NAVASOTA COVE

City WESTLAKE State TX Zip Code 76262-4801

FEC ID number of contributing federal political committee.

Name of Employer WESTLAKE INVESTMENTS, LLC Occupation INVESTMENTS

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11241**

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2015

Reattribute: From Laura Lynn Wheat

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LAURA LYNN WHEAT**

Mailing Address 2006 NAVASOTA COVE

City WESTLAKE State TX Zip Code 76262-4801

FEC ID number of contributing federal political committee.

Name of Employer CITY OF WESTLAKE Occupation MAYOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10521**

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MRS. LAURA LYNN WHEAT**

Mailing Address 2006 NAVASOTA COVE

City WESTLAKE State TX Zip Code 76262-4801

FEC ID number of contributing federal political committee.

Name of Employer CITY OF WESTLAKE Occupation MAYOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11240**

Date of Receipt  
MM / DD / YYYY  
06 / 24 / 2015

Reattribute: To Douglas Wheat

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR JOHN M. WHELAN**

Mailing Address 625 IVANHOE LN

City State Zip Code  
HOLMES BEACH FL 34217-1234

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

Name of Employer Occupation  
O'MEARA, FERGUSON WHELAN, AND CO. IN CONSULTING

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.10528**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**BILL WICHTERMAN**

Mailing Address 10157 PALMER DRIVE

City State Zip Code  
OAKTON VA 22124

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

Name of Employer Occupation  
COVINGTON & BURLING SR. LEGISLATIVE ADVISOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.11160**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period  
2700.00

**C.** Full Name (Last, First, Middle Initial)  
**DANA WICHTERMAN**

Mailing Address 10157 PALMER DRIVE

City State Zip Code  
OAKTON VA 22124

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.11162**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2015

Amount of Each Receipt this Period  
2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5900.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

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

**MS. PATSY L. WILCOX**

Mailing Address 2699 E. CLEARVIEW AVENUE

City REPUBLIC State MO Zip Code 65738-7503

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10561**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

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

**KYLE WILLIAMS**

Mailing Address 2056 TOPISAW DRIVE SE

City BOGUE CHITTO State MS Zip Code 39629-9679

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

Name of Employer TURNER INDUSTRIES GROUP, LLC Occupation PROJECT CONTROLS ANALYST

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.10595**

Date of Receipt

M M / D D / Y Y Y Y  
05 / 29 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

500.00

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

**KIRK WILSON**

Mailing Address 4418 BROOKVIEW DRIVE

City DALLAS State TX Zip Code 75220-6402

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

Name of Employer WILSON ASSOCIATED Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10619**

Date of Receipt

M M / D D / Y Y Y Y  
06 / 02 / 2015

**CONTRIBUTION**

Amount of Each Receipt this Period

2700.00

**Subtotal Of Receipts This Page** (optional).....▶ 5900.00

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**DR. BARRY A. WINGARD**

Mailing Address 1615 JERUSALEM ROAD

City State Zip Code  
MECHANICSBURG PA 17050-2075

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10639**

Date of Receipt  
MM / DD / YYYY  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

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

Mailing Address 785 MCKINLEY WAY

City State Zip Code  
MYRTLE BEACH SC 29577-5180

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

**Transaction ID : SA17A.10664**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**COL. W. STOVALL WITTE JR.**

Mailing Address 785 MCKINLEY WAY

City State Zip Code  
MYRTLE BEACH SC 29577-5180

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

Name of Employer Occupation  
COSTAL EDUCATIONAL FOUNDATION CEO

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

**Transaction ID : SA17A.10668**

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2500.00

**Subtotal Of Receipts This Page** (optional).....▶ 5700.00

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



**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**SUSIE WYLIE**

Mailing Address 713 REESE LANE

City State Zip Code  
HURST TX 76054-2030

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10715**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. WAYNE WYLIE**

Mailing Address 713 REESE LANE

City State Zip Code  
HURST TX 76054-2030

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
JPMORGAN CHASE CREDIT OFFICER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10717**

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. ZHOU XU**

Mailing Address 69-28 174TH STREET

City State Zip Code  
FRESH MEADOWS NY 11365-3411

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS ENGINEER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10719**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 15 / 2015

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANK ZACCANELLI**

Mailing Address 5608 BANISTER COURT

City	State	Zip Code
PLANO	TX	75093-4227

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIAMMA PARTNERS	OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10742**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANK ZACCANELLI**

Mailing Address 5608 BANISTER COURT

City	State	Zip Code
PLANO	TX	75093-4227

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIAMMA PARTNERS	OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11245**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

Redesignate: To General

Amount of Each Receipt this Period

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANK ZACCANELLI**

Mailing Address 5608 BANISTER COURT

City	State	Zip Code
PLANO	TX	75093-4227

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
FIAMMA PARTNERS	OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.11246**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

Redesignate: From Primary

Amount of Each Receipt this Period

**[MEMO ITEM]**

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MISS KAY KHOSRO ZAFAR**

Mailing Address 3026 MOCKINGBIRD LN APT 156

City	State	Zip Code
DALLAS	TX	75205-2323

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
CENTURION AMERICAN	SUPERVISOR

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10746**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			10			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES M. ZEISER**

Mailing Address 510 ROLLING WAY

City	State	Zip Code
SIGNAL MOUNTAIN	TN	37377-3118

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SOUTHERN CHAMPION TRAY	CHAIRMAN

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10770**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			24			2015			

CONTRIBUTION

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**JOHN ZEISER**

Mailing Address 17 ROCK CREST DR

City	State	Zip Code
SIGNAL MOUNTAIN	TN	37377-2326

FEC ID number of contributing federal political committee.

Name of Employer	Occupation
SOUTHERN CHAMPION TRAY L.P.	PRESIDENT/CEO

Receipt For: 2016  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA17A.10772**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
06			15			2015			

CONTRIBUTION

Amount of Each Receipt this Period

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

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

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CHARLOTTE ZURLO**

Mailing Address 4 NICKLAUS LANE

City State Zip Code  
JOHNS ISLAND SC 29455-5798

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10804**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**MR EUGENE J. ZURLO**

Mailing Address 4 NICKLAUS LANE

City State Zip Code  
JOHNS ISLAND SC 29455-5798

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

Name of Employer Occupation  
SELF-EMPLOYED INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

**Transaction ID : SA17A.10806**

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2015

CONTRIBUTION

Amount of Each Receipt this Period  
2700.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**Subtotal Of Receipts This Page** (optional).....▶ 5400.00

**Total This Period** (last page this line number only).....▶ 469122.58

**SCHEDULE A-P  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

**A.** Full Name (Last, First, Middle Initial)  
**ACTIVE ENGAGEMENT, L.L.C.**

Mailing Address 44084 RIVERSIDE PARKWAY SUITE 300

City State Zip Code  
LANSDOWNE VA 20176-5102

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

**Transaction ID : SA21.11370**

Date of Receipt  
M M / D D / Y Y Y Y

LIST RENTAL

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. 507 Photography**

Mailing Address P.O. Box 43

City Amboy State MN Zip Code 56010

Purpose of Disbursement  
Photography Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10928**

Amount of Each Disbursement this Period

500.00
--------

Full Name (Last, First, Middle Initial)

**B. A-Link Printing & Promotions**

Mailing Address 3189 Washington Pike

City Bridgeville State PA Zip Code 15017

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10961**

Amount of Each Disbursement this Period

1438.93
---------

Full Name (Last, First, Middle Initial)

**c. Active Engagement**

Mailing Address 44084 Riverside Parkway  
Suite 350

City Landsdowne State VA Zip Code 20176

Purpose of Disbursement  
Online Fundraising

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10963**

Amount of Each Disbursement this Period

6732.84
---------

**Subtotal Of Receipts This Page** (optional)..... 8671.77

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. SHELLEY AHLERSMEYER**

Mailing Address 84 POPLAR ST

City State Zip Code  
WARSAW IN 46582-6322

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10917

Amount of Each Disbursement this Period

3500.00
---------

Full Name (Last, First, Middle Initial)

**B. SHELLEY AHLERSMEYER**

Mailing Address 84 POPLAR ST

City State Zip Code  
WARSAW IN 46582-6322

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10918

Amount of Each Disbursement this Period

746.70
--------

Full Name (Last, First, Middle Initial)

**c. Courtyard Marriot - Cranberry Township**

Mailing Address 150 Cranberry Woods Drive

City State Zip Code  
Cranberry Township PA 16066

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10918.0

Amount of Each Disbursement this Period

533.95
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 4246.70

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





**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10883.3**

Amount of Each Disbursement this Period

5	0	2	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10883.4**

Amount of Each Disbursement this Period

2	4	1	.	7	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10883.5**

Amount of Each Disbursement this Period

2	4	1	.	7	0
---	---	---	---	---	---

[MEMO ITEM]

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.6

Amount of Each Disbursement this Period

3	8	9	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.7

Amount of Each Disbursement this Period

2	7	.	9	2
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.9

Amount of Each Disbursement this Period

5	2	.	0	0
---	---	---	---	---

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.10

Amount of Each Disbursement this Period

403.10
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.11

Amount of Each Disbursement this Period

570.10
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.14

Amount of Each Disbursement this Period

271.10
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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



# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Southwest**

Mailing Address PO Box 36647 - 1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement Airfare

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.18

Amount of Each Disbursement this Period

270.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement Airfare

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.19

Amount of Each Disbursement this Period

213.60
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement Airfare

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.20

Amount of Each Disbursement this Period

165.10
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.21

Amount of Each Disbursement this Period

26.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.22

Amount of Each Disbursement this Period

208.60
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 2706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.23

Amount of Each Disbursement this Period

245.60
--------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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

# SCHEDULE B-P ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Delta Airlines**

Mailing Address PO Box 2706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement Airfare

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.24

Amount of Each Disbursement this Period

4	3	8	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 LBJ Freeway Suite 500

City Dallas State TX Zip Code 75240

Purpose of Disbursement Lodging

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.25

Amount of Each Disbursement this Period

2	2	9	.	9	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement Airfare

101

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10883.26

Amount of Each Disbursement this Period

1	2	5	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

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

0	0	0	.	0	0
---	---	---	---	---	---

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

0	0	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.27

Amount of Each Disbursement this Period

200.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. US Airways**

Mailing Address 4000 E Sky Harbor Blvd

City Phoenix State AZ Zip Code 85034

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.28

Amount of Each Disbursement this Period

407.60
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.29

Amount of Each Disbursement this Period

1080.20
---------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Blvd

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.30

Amount of Each Disbursement this Period

87.69
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Hotels.com**

Mailing Address 5400 LBJ Freeway  
Suite 500

City Dallas State TX Zip Code 75240

Purpose of Disbursement  
Lodging

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.33

Amount of Each Disbursement this Period

831.68
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Delta Airlines**

Mailing Address PO Box 2706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10883.34

Amount of Each Disbursement this Period

9.00
------

[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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





**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. United Airlines**

Mailing Address 233 S Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.42

Amount of Each Disbursement this Period

542.10
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Amtrak**

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.44

Amount of Each Disbursement this Period

212.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. Amtrak**

Mailing Address 60 Massachusetts Avenue NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10883.45

Amount of Each Disbursement this Period

269.00
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[MEMO ITEM]

Subtotal Of Receipts This Page (optional)..... 0.00

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card & Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10944**

Amount of Each Disbursement this Period

8	7	1	.	6	8
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. American Southern Group, LLC**

Mailing Address 724 S. Shelmore Blvd.  
Suite 104

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement  
Advance Consulting & Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10885**

Amount of Each Disbursement this Period

1	5	0	9	.	5	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**c. American Southern Group, LLC**

Mailing Address 724 S. Shelmore Blvd.  
Suite 104

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement  
Advance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10943**

Amount of Each Disbursement this Period

3	0	0	.	0	0
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**Subtotal Of Receipts This Page** (optional).....

1	8	9	7	.	1	9
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**Total This Period** (last page this line number only).....

1	8	9	7	.	1	9
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>10</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		10		2015
M M	/	D D	/	Y Y Y Y									
06		10		2015									
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.10924</b>											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement Credit Card Processing/Merchant Fees	Category/Type		720.53										
Candidate Name	Disbursement For: 2016												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													
Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>16</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		16		2015
M M	/	D D	/	Y Y Y Y									
06		16		2015									
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.10979</b>											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement Credit Card Processing/Merchant Fees	Category/Type		258.97										
Candidate Name	Disbursement For: 2016												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													
Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>C. CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>23</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		23		2015
M M	/	D D	/	Y Y Y Y									
06		23		2015									
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.10936</b>											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement Credit Card Processing/Merchant Fees	Category/Type		530.79										
Candidate Name	Disbursement For: 2016												
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

**Subtotal Of Receipts This Page** (optional)..... 1510.29

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>A. CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		25		2015
M M	/	D D	/	Y Y Y Y									
06		25		2015									
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.10940</b>											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement Database Services	Category/ Type		20344.93										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>B. CMDI</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>25</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		25		2015
M M	/	D D	/	Y Y Y Y									
06		25		2015									
Mailing Address 1593 Spring Hill Road Suite 400		<b>Transaction ID : SB23.10941</b>											
City Tysons Corner	State VA	Zip Code 22182	Amount of Each Disbursement this Period										
Purpose of Disbursement Credit Card Processing/Merchant Fees	Category/ Type		530.79										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
<b>c. Colon &amp; Company</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>29</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		29		2015
M M	/	D D	/	Y Y Y Y									
06		29		2015									
Mailing Address 3311 Richmond, Suite 319		<b>Transaction ID : SB23.10949</b>											
City Houston	State TX	Zip Code 77098	Amount of Each Disbursement this Period										
Purpose of Disbursement Event Production & Travel	Category/ Type		34533.66										
Candidate Name													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼												
State: District:													

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

55409.38
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**Total This Period** (last page this line number only)..... 

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Foley & Lardner LLP**

Mailing Address 3000 K Street, N.W.  
Suite 600

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Legal Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10969**

Amount of Each Disbursement this Period

2926.00
---------

Full Name (Last, First, Middle Initial)

**B. BILL GARVER**

Mailing Address 101 STEPHENS LANE

City VERONA State PA Zip Code 15147

Purpose of Disbursement  
In-kind - FOOD & BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

**Transaction ID : SB23.11367**

Amount of Each Disbursement this Period

2118.42
---------

Full Name (Last, First, Middle Initial)

**c. Matthew Garver**

Mailing Address 101 Stephens Lane

City Verona State PA Zip Code 15147

Purpose of Disbursement  
Adminstrative Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SB23.10912**

Amount of Each Disbursement this Period

1000.00
---------

**Subtotal Of Receipts This Page** (optional)..... 6044.42

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Lisa Hendrickson**

Mailing Address 6101 Long Prairie Rd. St. 744-244

City Flower Mound State TX Zip Code 75028

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10957**

Amount of Each Disbursement this Period

1	2	9	9	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Matt's Rancho Martinez**

Mailing Address 113 N Oak Street

City Roanoke State TX Zip Code 76262

Purpose of Disbursement  
Food & Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10957.0**

Amount of Each Disbursement this Period

1	2	9	9	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. TINA HENOLD**

Mailing Address 1507 HAGLEY RD

City TOLEDO State OH Zip Code 43612-2257

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10919**

Amount of Each Disbursement this Period

1	5	0	0
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Subtotal Of Receipts This Page (optional).....

2	7	9	9	0	0
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Total This Period (last page this line number only).....

2	7	9	9	0	0
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. InfoCision Management Corporation**

Mailing Address P.O. Box 932441

City Cleveland State OH Zip Code 44193

Purpose of Disbursement  
Telemarketing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10974**

Amount of Each Disbursement this Period

6	3	9	6	.	7	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Innovative Consulting Solutions, LLC**

Mailing Address 645 Holland Cir.

City Columbia State SC Zip Code 29169

Purpose of Disbursement  
Political/Field Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10899**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**c. Jon Jones**

Mailing Address 8709 Owls Hollow Rd

City Gadsden State AL Zip Code 35901

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10976**

Amount of Each Disbursement this Period

5	1	1	7	.	5	1
---	---	---	---	---	---	---

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

1	6	5	1	.	4	2	7
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**Total This Period** (last page this line number only).....

1	6	5	1	.	4	2	7
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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Stay on Main**

Mailing Address 640 South Main Street

City Los Angles State CA Zip Code 90014

Purpose of Disbursement  
Lodging

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10976.4**

Amount of Each Disbursement this Period

2	4	2	5	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Courtyard Marriot - Cranberry Township**

Mailing Address 150 Cranberry Woods Drive

City Cranberry Township State PA Zip Code 16066

Purpose of Disbursement  
Lodging

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10976.6**

Amount of Each Disbursement this Period

1	8	5	2	5
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. Courtyard Marriot - Cranberry Township**

Mailing Address 150 Cranberry Woods Drive

City Cranberry Township State PA Zip Code 16066

Purpose of Disbursement  
Lodging

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10976.7**

Amount of Each Disbursement this Period

1	8	9	5	0
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[MEMO ITEM]

**Subtotal Of Receipts This Page** (optional)..... 0.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Sam's Club - Des Moines**

Mailing Address 1101 73rd Street

City Des Moines State IA Zip Code 50311

Purpose of Disbursement  
Office Supplies

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10976.9**

Amount of Each Disbursement this Period

329.53
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Mary Kilkenny**

Mailing Address PO Box 23173

City Alexandria State VA Zip Code 22304

Purpose of Disbursement  
Accounting & Compliance Services

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

**Transaction ID : SB23.10959**

Amount of Each Disbursement this Period

4175.97
---------

Full Name (Last, First, Middle Initial)

**C. Koch & Hoos, LLC**

Mailing Address 901 N Washington St., Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Accounting & Compliance Services

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SB23.10906**

Amount of Each Disbursement this Period

5000.00
---------

**Subtotal Of Receipts This Page** (optional)..... 9175.97

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Koch & Hoos, LLC**

Mailing Address 901 N Washington St., Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Accounting & Compliance Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 12 / 2015

Transaction ID : SB23.10955

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. L&W Group**

Mailing Address 97 N Main St

City Spring City State PA Zip Code 19475

Purpose of Disbursement  
Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10908

Amount of Each Disbursement this Period

1594.37
---------

Full Name (Last, First, Middle Initial)

**c. Jenifer A. Lee**

Mailing Address 55 Harris Road Extension

City Salem State CT Zip Code 06420

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
06 / 05 / 2015

Transaction ID : SB23.10901

Amount of Each Disbursement this Period

2250.00
---------

Subtotal Of Receipts This Page (optional)..... 8844.37

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Jenifer A. Lee**

Mailing Address 55 Harris Road Extension

City State Zip Code  
Salem CT 06420

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

**Transaction ID : SB23.10902**

Amount of Each Disbursement this Period

661.78
--------

Full Name (Last, First, Middle Initial)

**B. Courtyard Marriot - Cranberry Township**

Mailing Address 150 Cranberry Woods Drive

City State Zip Code  
Cranberry Township PA 16066

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

**Transaction ID : SB23.10902.3**

Amount of Each Disbursement this Period

392.30
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. Christina Leventis**

Mailing Address 2239 Versailles Court

City State Zip Code  
Henderson NV 89074

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

**Transaction ID : SB23.10894**

Amount of Each Disbursement this Period

348.00
--------

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

1009.78
---------

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

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Southwest**

Mailing Address PO Box 36647 - 1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Airfare

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10894.0**

Amount of Each Disbursement this Period

3	4	8	.	0	0
---	---	---	---	---	---

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Madison Strategic Ventures, LLC**

Mailing Address 8270 Greensboro Drive  
Suite 810

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Communications Consulting & Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10910**

Amount of Each Disbursement this Period

6	1	0	6	.	6	1
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Amanda R. McCormick**

Mailing Address 103 S. Valley Cmn.

City Madison State MS Zip Code 39110

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10881**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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**Subtotal Of Receipts This Page** (optional).....

7	6	0	6	.	6	1
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**Total This Period** (last page this line number only).....

7	6	0	6	.	6	1
---	---	---	---	---	---	---

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Mid-Coast Properties, LLC**

Mailing Address C/o Larry L. Reding  
2045 Grand Avenue Suite A

City West Des Moines State IA Zip Code 50265

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2015			

Transaction ID : SB23.10877

Amount of Each Disbursement this Period

2450.00
---------

Full Name (Last, First, Middle Initial)

**B. Jennifer Morano**

Mailing Address 9573 Sunnyslope Drive

City Manassas State VA Zip Code 20112

Purpose of Disbursement  
Campaign Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

Transaction ID : SB23.10904

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**c. NationBuilder**

Mailing Address 520 S Grand Ave, 2nd Floor

City Los Angeles State CA Zip Code 90071

Purpose of Disbursement  
Website, Digital and Email Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			12			2015			

Transaction ID : SB23.10978

Amount of Each Disbursement this Period

19834.00
----------

Subtotal Of Receipts This Page (optional)..... 23034.00

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Cari Pemberton**

Mailing Address 12944 Travis Street

City Overland Park State KS Zip Code 66209

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SB23.10889**

Amount of Each Disbursement this Period

2250.00
---------

Full Name (Last, First, Middle Initial)

**B. Cari Pemberton**

Mailing Address 12944 Travis Street

City Overland Park State KS Zip Code 66209

Purpose of Disbursement  
Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SB23.10890**

Amount of Each Disbursement this Period

387.39
--------

Full Name (Last, First, Middle Initial)

**C. Southwest**

Mailing Address PO Box 36647 - 1CR

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

**Transaction ID : SB23.10890.0**

Amount of Each Disbursement this Period

190.14
--------

**[MEMO ITEM]**

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

2637.39
---------

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

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**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Courtyard Marriot - Cranberry Township**

Mailing Address 150 Cranberry Woods Drive

City Cranberry Township State PA Zip Code 16066

Purpose of Disbursement  
Lodging

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB23.10890.1

Amount of Each Disbursement this Period

1	9	7	.	2	5
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Stephen L. Plunkett**

Mailing Address 17200 Westgrove Blvd. #2611

City Addison State TX Zip Code 75001

Purpose of Disbursement  
Online/Digital/Website Services

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	5

Transaction ID : SB23.10857

Amount of Each Disbursement this Period

4	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**c. Stephen L. Plunkett**

Mailing Address 17200 Westgrove Blvd. #2611

City Addison State TX Zip Code 75001

Purpose of Disbursement  
Online/Digital/Website Services

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

Transaction ID : SB23.10923

Amount of Each Disbursement this Period

4	0	0	.	0	0
---	---	---	---	---	---

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

8	0	0	.	0	0
---	---	---	---	---	---

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

8	0	0	.	0	0
---	---	---	---	---	---

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Sandra Rinker**

Mailing Address 911 Lovick Street

City Columbus State GA Zip Code 31904

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10916

Amount of Each Disbursement this Period

425.00
--------

Full Name (Last, First, Middle Initial)

**B. Valrie Sommerville**

Mailing Address 105 11th St. NE

City Massillon State OH Zip Code 44646

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Transaction ID : SB23.10921

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**c. Stripe**

Mailing Address 3180 18th Street

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card & Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Transaction ID : SB23.10932

Amount of Each Disbursement this Period

748.12
--------

Subtotal Of Receipts This Page (optional)..... 1923.12

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

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 3180 18th Street

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card & Merchant Fees

101

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2015

Transaction ID : SB23.10935

Amount of Each Disbursement this Period

29.24
-------

Full Name (Last, First, Middle Initial)

**B. Stripe**

Mailing Address 3180 18th Street

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card & Merchant Fees

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Transaction ID : SB23.10937

Amount of Each Disbursement this Period

15.58
-------

Full Name (Last, First, Middle Initial)

**c. Stripe**

Mailing Address 3180 18th Street

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card & Merchant Fees

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2015

Transaction ID : SB23.10939

Amount of Each Disbursement this Period

37.30
-------

Subtotal Of Receipts This Page (optional)..... 82.12

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



**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. Stripe**

Mailing Address 3180 18th Street

City San Francisco State CA Zip Code 94110

Purpose of Disbursement  
Credit Card & Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	5

**Transaction ID : SB23.10953**

Amount of Each Disbursement this Period

1	3	.	2	6
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. The Richard Norman Company**

Mailing Address 44084 Riverside Parkway, #350

City Landsdowne State VA Zip Code 20176

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10863**

Amount of Each Disbursement this Period

1	9	2	1	.	2	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**c. The Richard Norman Company**

Mailing Address 44084 Riverside Parkway, #350

City Landsdowne State VA Zip Code 20176

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.10864**

Amount of Each Disbursement this Period

1	2	9	3	.	7	0	5
---	---	---	---	---	---	---	---

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

3	2	2	4	.	1	5	4
---	---	---	---	---	---	---	---

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

--	--	--	--	--	--	--	--

**SCHEDULE B-P  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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)

**Santorum for President 2016**

Full Name (Last, First, Middle Initial)

**A. The Richard Norman Company**

Mailing Address 44084 Riverside Parkway, #350

City Landsdowne State VA Zip Code 20176

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			08			2015			

Transaction ID : SB23.10922

Amount of Each Disbursement this Period

27423.25
----------

Full Name (Last, First, Middle Initial)

**B. Verus Strategies**

Mailing Address 9911 Coley Drive

City Huntersville State NC Zip Code 28078

Purpose of Disbursement  
Management Consulting/Digital Ads/Travel

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2015			

Transaction ID : SB23.10951

Amount of Each Disbursement this Period

30407.86
----------

Full Name (Last, First, Middle Initial)

**C. EMILY ZIARKO**

Mailing Address 314 N CLAYPOOL RD

City MUNCIE State IN Zip Code 47303-5127

Purpose of Disbursement  
Grassroots Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			05			2015			

Transaction ID : SB23.10897

Amount of Each Disbursement this Period

625.00
--------

Subtotal Of Receipts This Page (optional)..... 58456.11

Total This Period (last page this line number only)..... 374805.28

**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

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

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**Santorum for President 2016**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Aristotle International, Inc.**

Nature of Debt (Purpose):  
 Database Services

Mailing Address 205 Pennsylvania Avenue

City State Zip Code  
 Washington DC 20003

Outstanding Balance Beginning This Period

Transaction ID : SD12.11349

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Beag, Inc.**

Nature of Debt (Purpose):  
 Website Development

Mailing Address 6 Holliben Ct.

City State Zip Code  
 Severna Park MD 21146

Outstanding Balance Beginning This Period

Transaction ID : SD12.11351

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

Nature of Debt (Purpose):  
 Media Consulting/Production/Services

Mailing Address 1218 Grandview Ave

City State Zip Code  
 Pittsburgh PA 15211

Outstanding Balance Beginning This Period

Transaction ID : SD12.11352

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

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

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**Santorum for President 2016**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**CMDI**

Nature of Debt (Purpose):  
 Database Services

Mailing Address 1593 Spring Hill Road  
 Suite 400

City State Zip Code  
 Tysons Corner VA 22182

Outstanding Balance Beginning This Period

Transaction ID : SD12.11353

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Koch & Hoos, LLC**

Nature of Debt (Purpose):  
 Accounting & Compliance Services

Mailing Address 901 N Washington St., Suite 700

City State Zip Code  
 Alexandria VA 22314

Outstanding Balance Beginning This Period

Transaction ID : SD12.11354

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**NationBuilder**

Nature of Debt (Purpose):  
 Website, Digital & Email Services

Mailing Address 520 S Grand Ave, 2nd Floor

City State Zip Code  
 Los Angeles CA 90071

Outstanding Balance Beginning This Period

Transaction ID : SD12.11355

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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



**SCHEDULE D-P**  
**DEBTS AND OBLIGATIONS (Excluding Loans)**

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

FOR LINE NUMBER:  11  
 12

NAME OF COMMITTEE (In Full)  
**Santorum for President 2016**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**RSEC Consulting**

Nature of Debt (Purpose):  
 Campaign Consulting

Mailing Address 8709 Owls Hollow Road

City State Zip Code  
 Gadsden AL 35901

Outstanding Balance Beginning This Period

Transaction ID : SD12.11356

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Richard J. Santorum**

Nature of Debt (Purpose):  
 Travel

Mailing Address P.O. Box 238

City State Zip Code  
 Verona PA 15147

Outstanding Balance Beginning This Period

Transaction ID : SD12.11368

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Richard Norman Company**

Nature of Debt (Purpose):  
 Direct Mail

Mailing Address 44084 Riverside Parkway, #350

City State Zip Code  
 Landsdowne VA 20176

Outstanding Balance Beginning This Period

Transaction ID : SD12.11358

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="44204.82"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="124638.55"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only).....	<input type="text" value="124638.55"/>