

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Restoration PAC

ADDRESS (number and street)

P.O. Box 4808

Check if different
than previously
reported. (ACC)

Oak Brook

IL

60522

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00571588

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Gaskill, Sherry, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Gaskill, Sherry, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Restoration PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		669805.52
(b) Cash on Hand at Beginning of Reporting Period.....	93860.44	
(c) Total Receipts (from Line 19)	1584188.99	1630971.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1678049.43	2300776.76
7. Total Disbursements (from Line 31).....	947449.29	1570176.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	730600.14	730600.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Restoration PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07	/	01	/	2016

To:

M M	/	D D	/	Y Y Y Y
09	/	30	/	2016

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1581699.99

1587733.31

(ii) Unitemized

2489.00

13731.93

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

1584188.99

1601465.24

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

1584188.99

1601465.24

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

29506.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

1584188.99

1630971.24

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

1584188.99

1630971.24

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	115549.29	271654.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	115549.29	271654.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	831900.00	1298472.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	50.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	50.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	947449.29	1570176.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	947449.29	1570176.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1584188.99	1601465.24
34. Total Contribution Refunds (from Line 28(d))	0.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1584188.99	1601415.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	115549.29	271654.62
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	29506.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	115549.29	242148.62

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

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

FOR LINE NUMBER: PAGE 6 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Considine, Terry, , ,

Mailing Address 4582 S Ulster St Parkway
#410

City
Denver

State
CO

Zip Code
80237

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Aimco

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 12 / 2016

Transaction ID : SA11AI.5730

Amount of Each Receipt this Period

1000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Goers, Ronald, , ,

Mailing Address 6700 RT 83

City
Darien

State
IL

Zip Code
60561

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-employed

Occupation (for Individual)
Dentist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

07 / 20 / 2016

Transaction ID : SA11AI.5538

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Goodyear, Priscilla, , ,

Mailing Address 10042 Signet Circle

City
Huntington Beach

State
CA

Zip Code
92646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

07 / 20 / 2016

Transaction ID : SA11AI.5539

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

1150.00

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

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

FOR LINE NUMBER: PAGE 7 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Goodyear, Priscilla, , ,

Mailing Address 10042 Signet Circle

City
Huntington Beach

State
CA

Zip Code
92646

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.5714

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Haynes, Guy, , ,

Mailing Address 26 Bassy St.

City
Lebanon

State
NH

Zip Code
03766

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 15 / 2016

Transaction ID : SA11AI.5544

Amount of Each Receipt this Period

100.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Hubbard, Stanley, S., ,

Mailing Address 3415 University Avenue W

City
Saint Paul

State
MN

Zip Code
55114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hubbard Broadcasting, Inc.

Occupation (for Individual)

Chairman/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.5718

Amount of Each Receipt this Period

10000.00

☐ Memo Item
Contribution

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

10200.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Kline, Roy, , ,

Mailing Address 10575 Dacre Place

City
Lone TreeState
COZip Code
80124FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WDG, LLCOccupation (for Individual)
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.5709

Amount of Each Receipt this Period

15000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Rust, Robert, W., ,

Mailing Address 1430 S. Dixie Highway
Suite 31City
Coral GablesState
FLZip Code
33146FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA11AI.5748

Amount of Each Receipt this Period

5000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Smith, Sheila, , ,

Mailing Address 34620 Clayton Rd

City
Dade CityState
FLZip Code
33523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RetiredOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.5559

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

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

20050.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Smith, Sheila, , ,

Mailing Address 34620 Clayton Rd

City
Dade CityState
FLZip Code
33523FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.5678

Amount of Each Receipt this Period

50.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Uihlein, Richard, E., ,

Mailing Address 1396 N. Waukegan Rd.

City
Lake ForestState
ILZip Code
60045FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Uline

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2016

Transaction ID : SA11AI.5751

Amount of Each Receipt this Period

1050000.00

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Uihlein, Richard, E., ,

Mailing Address 1396 N. Waukegan Rd.

City
Lake ForestState
ILZip Code
60045FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Uline

Occupation (for Individual)

CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1550000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 15 / 2016

Transaction ID : SA11AI.5752

Amount of Each Receipt this Period

500000.00

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

1550050.00

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Walsh, Bob, , ,

Mailing Address 84 Waverly Avenue

City
Clarendon Hills

State
IL

Zip Code
60514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1965

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

583.31

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 05 / 2016

Transaction ID : SA11AI.5564

Amount of Each Receipt this Period

83.33

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Walsh, Bob, , ,

Mailing Address 84 Waverly Avenue

City
Clarendon Hills

State
IL

Zip Code
60514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1965

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.5679

Amount of Each Receipt this Period

83.33

☐ Memo Item
Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Walsh, Bob, , ,

Mailing Address 84 Waverly Avenue

City
Clarendon Hills

State
IL

Zip Code
60514

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
1965

Occupation (for Individual)
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

749.97

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2016

Transaction ID : SA11AI.5726

Amount of Each Receipt this Period

83.33

☐ Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

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

249.99

1581699.99

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Bluebonnet Fundraising

Mailing Address 3300 Bee Caves Road #650-1151

City
AustinState
TXZip Code
78746Purpose of Disbursement
Fundraising consulting

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5793

Amount of Each Disbursement this Period

7600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Bluebonnet Fundraising

Mailing Address 3300 Bee Caves Road #650-1151

City
AustinState
TXZip Code
78746Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5795

Amount of Each Disbursement this Period

1444.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. The Brown Palace Hotel and Spa

Mailing Address 321 17th Street

City
DenverState
COZip Code
80202Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5795.

Amount of Each Disbursement this Period

1041.93

☒ Memo Item

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

9044.13

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 7001 Tower Road

City
DenverState
COZip Code
80249Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

FEC Identification Number

C

Transaction ID : SB21B.5795.

Amount of Each Disbursement this Period

402.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Office expense reimbursement

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2016

FEC Identification Number

C

Transaction ID : SB21B.5574

Amount of Each Disbursement this Period

16.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22314Purpose of Disbursement
Website maintenance, email deployment

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5598

Amount of Each Disbursement this Period

2538.26

☐ Memo Item

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

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

2554.26

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Capitol Media Partners

Mailing Address 2468 S. Camino Real

City
Palm SpringsState
CAZip Code
92264Purpose of Disbursement
Political strategy consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

FEC Identification Number

C

Transaction ID : SB21B.5596

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Capitol Media Partners

Mailing Address 2468 S. Camino Real

City
Palm SpringsState
CAZip Code
92264Purpose of Disbursement
Political strategy consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2016

FEC Identification Number

C

Transaction ID : SB21B.5782

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2016

FEC Identification Number

C

Transaction ID : SB21B.5576

Amount of Each Disbursement this Period

100.00

☐ Memo Item

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

10100.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5597

Amount of Each Disbursement this Period

[REDACTED] 40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Chain Bridge Bank

Mailing Address 1445-A Laughlin Avenue

City
McLeanState
VAZip Code
22101Purpose of Disbursement
Bank fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5778

Amount of Each Disbursement this Period

[REDACTED] 40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Clear Creek Strategies

Mailing Address PO Box 9865

City
DenverState
COZip Code
80209Purpose of Disbursement
Strategy Consulting

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	6		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5779

Amount of Each Disbursement this Period

[REDACTED] 7500.00

☐ Memo Item

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

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

[REDACTED] 7580.00

[REDACTED]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Communications Counsel, Inc.

Mailing Address 37 West Broad Street, Suite 325

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
Polling expense

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				1	4					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.5573

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Communications Counsel, Inc.

Mailing Address 37 West Broad Street, Suite 325

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
Polling expense

005

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Transaction ID : SB21B.5599

Amount of Each Disbursement this Period

11250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Connell Donatelli, Inc.

Mailing Address P.O. Box 1877

City
AlexandriaState
VAZip Code
22313Purpose of Disbursement
Digital Advertising

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	8					2	0	1

FEC Identification Number

C

Transaction ID : SB21B.5570

Amount of Each Disbursement this Period

1500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

24750.00

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SB21B**

Transaction ID : **SB21B.5570**

This communication did not contain express advocacy for or against any candidate.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Connell Donatelli, Inc.

Mailing Address P.O. Box 1877

City
AlexandriaState
VAZip Code
22313Purpose of Disbursement
Digital Advertising

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5799

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CrowdskoutMailing Address 1920 L St. NW
Ste. 325City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Software licensing

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5569

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CrowdskoutMailing Address 1920 L St. NW
Ste. 325City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Software licensing

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5594

Amount of Each Disbursement this Period

100.00

☐ Memo Item

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

1700.00

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

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SB21B**

Transaction ID : **SB21B.5799**

This communication did not contain express advocacy for or against any candidate.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Crowdskout

Mailing Address 1920 L St. NW
Ste. 325

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Software licensing

004

Category/
Type

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 Y Y
09 / 01 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5659

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Crowdskout

Mailing Address 1920 L St. NW
Ste. 325

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Software licensing

004

Category/
Type

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 Y Y
09 / 28 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5801

Amount of Each Disbursement this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
Glenview

State
IL

Zip Code
60026

Purpose of Disbursement
Strategic planning consulting

001

Category/
Type

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 Y Y
07 / 01 / 2016

FEC Identification Number

C

Transaction ID : SB21B.5567

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

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

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

12200.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic planning consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5591

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Software expense reimbursement

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5592

Amount of Each Disbursement this Period

168.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Meal expense reimbursement

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5771

Amount of Each Disbursement this Period

75.15

☐ Memo Item

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

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

12243.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Delos Communications

Mailing Address 2700 Patriot Blvd., Ste. 250

City
GlenviewState
ILZip Code
60026Purpose of Disbursement
Strategic planning consulting

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5777

Amount of Each Disbursement this Period

12000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Downes and Associates

Mailing Address 1560 West Briarwood

City
LittletonState
COZip Code
80120Purpose of Disbursement
Press release distribution

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5589

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. eDonation.com

Mailing Address 117 North Saint Asaph Street

City
AlexandriaState
VAZip Code
22315Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5568

Amount of Each Disbursement this Period

292.37

☐ Memo Item

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

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

17292.37

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

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

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. eDonation.com

Mailing Address 117 North Saint Asaph Street

City
Alexandria

State
VA

Zip Code
22315

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 02 / 2016

FEC Identification Number

C Transaction ID : SB21B.5595

Amount of Each Disbursement this Period

128.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. eDonation.com

Mailing Address 117 North Saint Asaph Street

City
Alexandria

State
VA

Zip Code
22315

Purpose of Disbursement
Online fundraising fees

003

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2016

FEC Identification Number

C Transaction ID : SB21B.5661

Amount of Each Disbursement this Period

159.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Gadsden Media Group

Mailing Address 3575 Maybank Highway
Ste. D #253

City
John Island

State
SC

Zip Code
02945

Purpose of Disbursement
Advertising expense

004

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2016

FEC Identification Number

C Transaction ID : SB21B.5587

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

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

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

5288.01

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: **SB21B**

Transaction ID : **SB21B.5587**

This communication did not contain express advocacy for or against any candidate.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Office Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5579

Amount of Each Disbursement this Period

31.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Office Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5636

Amount of Each Disbursement this Period

31.37

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Grasshopper Group, LLC

Mailing Address 197 1st Avenue, Suite 200

City
NeedhamState
MAZip Code
02494Purpose of Disbursement
Office Expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5802

Amount of Each Disbursement this Period

31.37

☐ Memo Item

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

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

94.11

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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

NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Langdon Law LLC

Mailing Address 8913 Cincinnati-Dayton Rd.

City
West ChesterState
OHZip Code
45069Purpose of Disbursement
Legal fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5580

Amount of Each Disbursement this Period

5850.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Langdon Law LLC

Mailing Address 8913 Cincinnati-Dayton Rd.

City
West ChesterState
OHZip Code
45069Purpose of Disbursement
Legal fees

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5798

Amount of Each Disbursement this Period

2195.45

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Regus Management Group, LLC

Mailing Address P.O. Box 842456

City
DallasState
TXZip Code
75284Purpose of Disbursement
Rent expense

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	8			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5586

Amount of Each Disbursement this Period

752.30

☐ Memo Item

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

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

8797.88

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Regus Management Group, LLC

Mailing Address P.O. Box 842456

City
DallasState
TXZip Code
75284Purpose of Disbursement
Rent expense

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5657

Amount of Each Disbursement this Period

267.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Truax, Doug, , ,

Mailing Address 1900 Spring Road, Ste. 530

City
Oak BrookState
ILZip Code
60523Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	9			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5637

Amount of Each Disbursement this Period

983.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City
DFW AirportState
TXZip Code
75261Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	7			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5637.

Amount of Each Disbursement this Period

266.20

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1251.14

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City
DFW AirportState
TXZip Code
75261Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5637.3

Amount of Each Disbursement this Period

131.90

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. The Brown Palace Hotel and Spa

Mailing Address 321 17th Street

City
DenverState
COZip Code
80202Purpose of Disbursement
Lodging expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5637.3

Amount of Each Disbursement this Period

452.12

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Truax, Doug, , ,

Mailing Address 1900 Spring Road, Ste. 530

City
Oak BrookState
ILZip Code
60523Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5783

Amount of Each Disbursement this Period

1341.84

☐ Memo Item

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

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

1341.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. Renaissance Denver Hotel

Mailing Address 3801 Quebec Street

City
DenverState
COZip Code
80207Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5783.4

Amount of Each Disbursement this Period

525.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address P.O. Box 619616, MD 5675

City
DFW AirportState
TXZip Code
75261Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	5			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5783.5

Amount of Each Disbursement this Period

173.20

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address PO Box 06649

City
ChicagoState
ILZip Code
60606Purpose of Disbursement
Travel expense reimbursement

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.5783.

Amount of Each Disbursement this Period

298.10

☒ Memo Item

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

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

0.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 32

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)

Restoration PAC

Full Name (Last, First, Middle Initial)

A. US Post Office

Mailing Address 1314 Kensington Rd.

City
Oak BrookState
ILZip Code
60523Purpose of Disbursement
Office Expense

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	8			2	0	1	6		

FEC Identification Number

C Transaction ID : SB21B.5578

Amount of Each Disbursement this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Veritas Risk ServicesMailing Address 3025 Highland Parkway
Ste. 650City
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Rent expense

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	0			2	0	1	6		

FEC Identification Number

C Transaction ID : SB21B.5655

Amount of Each Disbursement this Period

446.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Veritas Risk ServicesMailing Address 3025 Highland Parkway
Ste. 650City
Downers GroveState
ILZip Code
60515Purpose of Disbursement
Rent expense

001

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

C Transaction ID : SB21B.5804

Amount of Each Disbursement this Period

446.20

☐ Memo Item

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

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

1292.40

115529.29

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Restoration PAC			FEC IDENTIFICATION NUMBER ▼ C C00571588	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Boulevard Design ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 23 / 2016	
Mailing Address 1320 N. Courthouse Rd. Suite 130			Amount 20000.00	
City Arlington	State VA	Zip Code 22201	Transaction ID : SE.5757 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2016	
Purpose of Expenditure TV Advertising		Category/ Type 004		
Name of Federal Candidate: Glenn, Darryl, , , ☒ Support ☐ Oppose			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 827900.00			Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶	
Full Name of Payee Campaign Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Mailing Address 117 North Saint Asaph Street			Amount 1500.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5758 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Purpose of Expenditure Digital Advertising (production cost)		Category/ Type 004		
Name of Federal Candidate: Glenn, Darryl, , , ☒ Support ☐ Oppose			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 829400.00			Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			21500.00	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Gaskill, Sherry, , , Signature			Date M M / D D / Y Y Y Y Y Y 01 / 30 / 2017	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Restoration PAC			FEC IDENTIFICATION NUMBER ▼ C C00571588	
Check if ☐ 24-hour report ☐ 48-hour report			New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Campaign Solutions ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Mailing Address 117 North Saint Asaph Street			Amount 8500.00	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE.5759	
Purpose of Expenditure Digital advertising (production cost)		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 25 / 2016	
Name of Federal Candidate: Glenn, Darryl, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 837900.00			Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶	
Full Name of Payee Jamestown Associates ☐ Memo Item			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 23 / 2016	
Mailing Address 116 Craig Road			Amount 1900.00	
City Manalapan	State NJ	Zip Code 07726	Transaction ID : SE.5756	
Purpose of Expenditure TV Advertising (production cost)		Category/ Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 23 / 2016	
Name of Federal Candidate: Glenn, Darryl, , ,			Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought 807900.00			Disbursement For: ☐ Primary ☒ General 2016 ☐ Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures			10400.00	
(a) SUBTOTAL of Unitemized Independent Expenditures				
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>Gaskill, Sherry, , ,</u> [Electronically Filed]			Date M M / D D / Y Y Y Y Y Y 01 / 30 / 2017	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 32
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Restoration PAC				FEC IDENTIFICATION NUMBER ▼ C C00571588	
Check if ☐ 24-hour report ☐ 48-hour report				New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Strategic Media Services, Inc.			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 23 / 2016		
Mailing Address 1911 North Ft. Myer Drive Suite 400			Amount 800000.00		
City Arlington		State VA	Zip Code 22209		Transaction ID : SE.5755
Purpose of Expenditure TV Advertising (placement cost)			Category/ Type 004		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 07 / 18 / 2016
Name of Federal Candidate: Glenn, Darryl, , ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☐ President ☒ Senate State: CO
Calendar Year-To-Date Per Election for Office Sought			806000.00		
Disbursement For: ☐ Primary ☒ General ☐ Other (specify) ▶			2016		
Full Name of Payee			☐ Memo Item Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure			Category/ Type 		
Name of Federal Candidate:			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought					
Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶					
(a) SUBTOTAL of Itemized Independent Expenditures			800000.00		
(a) SUBTOTAL of Unitemized Independent Expenditures					
(a) TOTAL Independent Expenditures			831900.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature Gaskill, Sherry, , ,			[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 01 / 30 / 2017