

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

Stop Hillary PAC

ADDRESS (number and street)

203 South Union Street

Ste 300

Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00544767

3. IS THIS REPORT

NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - 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 / / in the State of

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

Election on / / in the State of

5. Covering Period

/ / 2016

through

/ / 2016

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

Type or Print Name of Treasurer Dan Backer

Signature of Treasurer

Dan Backer

[Electronically Filed]

Date

/ / 2016

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

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Stop Hillary PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		116420.64
(b) Cash on Hand at Beginning of Reporting Period.....	116420.64	
(c) Total Receipts (from Line 19)	47970.39	47970.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	164391.03	164391.03
7. Total Disbursements (from Line 31).....	94371.46	94371.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	70019.57	70019.57
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)	41320.86	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Stop Hillary PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2016 To: M M / D D / Y Y Y Y 01 / 31 / 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).....	500.00	500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	500.00	500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	500.00	500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	47470.39	47470.39
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))..... ▶	47970.39	47970.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	47970.39	47970.39

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	73.29	73.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	73.29	73.29
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)	10027.05	10027.05
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	34507.06	34507.06
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	10.00	10.00
(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)).....	10.00	10.00
29. Other Disbursements	49754.06	49754.06
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	94371.46	94371.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94371.46	94371.46

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	500.00	500.00
34. Total Contribution Refunds (from Line 28(d))	10.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	490.00	490.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	73.29	73.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	73.29	73.29

**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 28
(check only one)

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

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ROBERT VLASIC
Full Name (Last, First, Middle Initial)
Mailing Address 716 OCEAN DRIVE
City JUNO BEACH State FL Zip Code 33408
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFFC
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 13 / 2016
Transaction ID : SA11.117507
Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. J SCOTT BECKENDORF
Full Name (Last, First, Middle Initial)

Mailing Address 7 IRONWOOD ROAD

City SAN ANTONIO State TX Zip Code 78212

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

Name of Employer WINE CONSULTANTS Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : SA11.117903

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

B. HOWARD COLLIER
Full Name (Last, First, Middle Initial)

Mailing Address 581 JOLLY ROGERS RD ADDRESS 2

City ABILENE State TX Zip Code 79601

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

Name of Employer RETIRED Occupation ELECTRICAL ENGINEERING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 27 / 2016

Transaction ID : SA11.119562

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

Mailing Address P.O. BOX 143

City SUN VALLEY State ID Zip Code 83353

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

Name of Employer ME Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2016

Transaction ID : SA11.117904

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. PHYLLIS DORRICOTT
Full Name (Last, First, Middle Initial)
Mailing Address 26710 BIRCH HILL WAY

City LOS ALTOS HILLS	State CA	Zip Code 94022
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation RETIRED
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	27	/	2016

Transaction ID : SA11.119561

Amount of Each Receipt this Period

250.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT

B. CHRISTY GREEN
Full Name (Last, First, Middle Initial)
Mailing Address 506 CHRISTINE DRIVE

City VACAVILLE	State CA	Zip Code 95687
-------------------	-------------	-------------------

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

Name of Employer SOLANO COMMUNITY COLLEGE	Occupation CHEMISTRY LAB MANAGER
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	26	/	2016

Transaction ID : SA11.119411

Amount of Each Receipt this Period

250.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT

C. MICHAEL KOSTAS
Full Name (Last, First, Middle Initial)
Mailing Address 2810 COBB LANE

City SMYRNA	State GA	Zip Code 30082
----------------	-------------	-------------------

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

Name of Employer SELF	Occupation CHIROPRACTIC PHYSICIAN
--------------------------	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01	/	30	/	2016

Transaction ID : SA11.119682

Amount of Each Receipt this Period

250.00

CONTRIBUTION
NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional).....▶	750.00
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 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. ALEXIS LAMOTHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 13111 IRWIN WAY
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 01 / 21 / 2016
Transaction ID : SA11.118756
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

B. ALEXIS LAMOTHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 13111 IRWIN WAY
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 01 / 22 / 2016
Transaction ID : SA11.118910
 Amount of Each Receipt this Period 50.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

C. ALEXIS LAMOTHE
 Full Name (Last, First, Middle Initial)
 Mailing Address 13111 IRWIN WAY
 City CARMEL State IN Zip Code 46032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00
 Date of Receipt 01 / 27 / 2016
Transaction ID : SA11.119558
 Amount of Each Receipt this Period 100.00
 CONTRIBUTION
 NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. BENJAMIN METZLER
Full Name (Last, First, Middle Initial)

Mailing Address 511 MONTCLAIR COURT

City PARKTON State MD Zip Code 21120

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

Name of Employer ELEMENT FLEET MANAGEMENT Occupation PROJECT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 26 / 2016
Transaction ID : SA11.119412

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

B. WILLIAM NAEGELE
Full Name (Last, First, Middle Initial)

Mailing Address 4300 BAKER ROAD

City MINNETONKA State MN Zip Code 55343

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

Name of Employer RESTAURANTS NO LIMIT Occupation RESTAURANT/REAL ESTATE

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
 01 / 08 / 2016
Transaction ID : SA11.118112

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

C. WILLIAM NAEGELE
Full Name (Last, First, Middle Initial)

Mailing Address 4300 BAKER ROAD

City MINNETONKA State MN Zip Code 55343

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

Name of Employer RESTAURANTS NO LIMIT Occupation RESTAURANT/REAL ESTATE

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
 01 / 27 / 2016
Transaction ID : SA11.119559

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. JACK RETTIG
Full Name (Last, First, Middle Initial)

Mailing Address 316 ROYAL PLAZA DRIVE

City FORT LAUDERDALE State FL Zip Code 33301

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

Name of Employer SELF Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 01 / 06 / 2016
Transaction ID : SA11.117905

Amount of Each Receipt this Period 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

B. MARK RODACK
Full Name (Last, First, Middle Initial)

Mailing Address 16051 COLLINS AVE 3502

City SUNNY ISLES BEACH State FL Zip Code 33160

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 06 / 2016
Transaction ID : SA11.117906

Amount of Each Receipt this Period 500.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

C. MARK RODACK
Full Name (Last, First, Middle Initial)

Mailing Address 16051 COLLINS AVE 3502

City SUNNY ISLES BEACH State FL Zip Code 33160

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 01 / 21 / 2016
Transaction ID : SA11.118760

Amount of Each Receipt this Period 100.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

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 12 OF 28
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)
A. DENNIS ROSS

Mailing Address 703 1ST AVE SE

City State Zip Code
DODGE CENTER MN 55927

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

Name of Employer Occupation
SELF BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2016
Transaction ID : SA11.119410

Amount of Each Receipt this Period
250.00

CONTRIBUTION

NON CONTRIBUTION ACCOUNT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	3950.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN RD

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT PROCESSING FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 04 / 2016

Transaction ID : SB21B.I80138

Amount of Each Disbursement this Period

73.29

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

73.29

73.29

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. AMERICAN ACTION NEWS LLC

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
December Monthly Online Advertising Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : SB26.I57973

Amount of Each Disbursement this Period

1125.00

Full Name (Last, First, Middle Initial)

B. BIG EYE DIRECT

Mailing Address 13860 REDSKIN DR.

City HERNDON State VA Zip Code 20171

Purpose of Disbursement
August/September postage costs (subvendor to Allegiance Direct, paid separately)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : SB26.I57972

Amount of Each Disbursement this Period

5366.56

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
December Monthly External Deployment Costs

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 08 / 2016

Transaction ID : SB29.I78570_B

Amount of Each Disbursement this Period

2463.27

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

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

8954.83

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
August/September Monthly Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : **SB26.I78571**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
October Monthly Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : **SB26.I78571_B**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
December Monthly Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

Transaction ID : **SB26.I78571_C**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CD, INC.

Mailing Address P.O. BOX 1877

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
December Monthly Online Advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 18 / 2016

Transaction ID : SB26.I78574

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

3500.00

34507.06

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DONNY FERGUSON

Mailing Address 101 SKYHILL ROAD
#203

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- POLITICAL AND CONTENT SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2016

Transaction ID : **SB29.I78564**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- ADVOCACY AND ONLINE COMMUNICATION SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2016

Transaction ID : **SB29.I78570**

Amount of Each Disbursement this Period

10373.00

Full Name (Last, First, Middle Initial)

C. CAMPAIGN SOLUTIONS

Mailing Address 117 NORTH SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT - FUNDRAISING PROCESSING COSTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2016

Transaction ID : **SB29.I78579**

Amount of Each Disbursement this Period

5822.51

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

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

20195.51

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD
#400

City VIENNA State VA Zip Code 22182

Purpose of Disbursement
CAREY DISBURSEMENT- COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2016

Transaction ID : SB29.I57977

Amount of Each Disbursement this Period

2900.00

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- BALLOT CHALLENGE EXPENSES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 15 / 2016

Transaction ID : SB29.I57978

Amount of Each Disbursement this Period

16365.80

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- MEDIA SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : SB29.I78569

Amount of Each Disbursement this Period

75.00

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

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

19340.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. DB CAPITOL STRATEGIES

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- LEGAL AND COMPLIANCE SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : **SB29.I78576**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. DB CAPITOL STRATEGIES

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- ACTIVE LITIGATION SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : **SB29.I78576_B**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. DB CAPITOL STRATEGIES

Mailing Address 203 S UNION ST
STE 300

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CAREY DISBURSEMENT- MEDIA SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 28 / 2016

Transaction ID : **SB29.I78576_C**

Amount of Each Disbursement this Period

150.00

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

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

10150.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Stop Hillary PAC

Full Name (Last, First, Middle Initial)

A. SAME DAY PROCESSING

Mailing Address 7300 HUDSON BLVD N
STE 240

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CAREY DISBURSEMENT- CAGING AND PAYMENT PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 05 / 2016

Transaction ID : SB29.I57971

Amount of Each Disbursement this Period

67.75

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

67.75

49754.06

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Action News	Nature of Debt (Purpose): EST JAN MONTHLY ONLINE ADVERTISING FEES
Mailing Address 203 S Union St Suite 300	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD.201601002	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor American Action News Llc	Nature of Debt (Purpose): December Monthly Online Advertising Fees
Mailing Address 203 S Union St Ste 300	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 1125.00	Transaction ID : SD.2015002	
Amount Incurred This Period 0.00	Payment This Period 1125.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Big Eye Direct	Nature of Debt (Purpose): August/September postage costs
Mailing Address 13860 Redskin Dr	
City State Zip Code Herndon VA 20171	

Outstanding Balance Beginning This Period 5366.56	Transaction ID : SD.2015005	
Amount Incurred This Period 0.00	Payment This Period 5366.56	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	2500.00
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 (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions	Nature of Debt (Purpose): Dec. Monthly External Deployment Costs
Mailing Address 117 N. Saint Asaph St	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="2463.27"/>	Transaction ID : SD.2015003	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2463.27"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions	Nature of Debt (Purpose): Jan. Monthly External Deployment Costs
Mailing Address 117 N. Saint Asaph St	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD.201601001	
Amount Incurred This Period <input type="text" value="7091.17"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7091.17"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Solutions	Nature of Debt (Purpose): EST JAN MONTHLY FACEBOOK ADVERTISING
Mailing Address 117 N. SAINT ASAPH ST	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD.201601003	
Amount Incurred This Period <input type="text" value="10000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10000.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="17091.17"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CD, Inc.	Nature of Debt (Purpose): December Monthly Online Advertising
Mailing Address P.O. BOX 1877	
City State Zip Code Alexandria VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID : SD.2015004	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3500.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CD, Inc.	Nature of Debt (Purpose): Aug/Sept Monthly Online Advertising
Mailing Address P.O. BOX 1877	
City State Zip Code Alexandria VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="13245.55"/>	Transaction ID : SD.2015006	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="13245.55"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CD, Inc.	Nature of Debt (Purpose): October Monthly Online Advertising
Mailing Address P.O. BOX 1877	
City State Zip Code Alexandria VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="3806.68"/>	Transaction ID : SD.2015008	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3806.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CD, Inc.	Nature of Debt (Purpose): December Monthly Online Advertising
Mailing Address P.O. BOX 1877	
City State Zip Code Alexandria VA 22313	

Outstanding Balance Beginning This Period <input type="text" value="5000.00"/>	Transaction ID : SD.2015009	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MDS Communications Corp	Nature of Debt (Purpose): Aug/Sept Monthly Outbound Calling Costs
Mailing Address 545 W. Juanita Avenue	
City State Zip Code Mesa AZ 85210	

Outstanding Balance Beginning This Period <input type="text" value="9713.64"/>	Transaction ID : SD.2015001	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9713.64"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MediaDC	Nature of Debt (Purpose): December Monthly Advertising
Mailing Address 1150 17th St NW Suite 503	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period <input type="text" value="440.05"/>	Transaction ID : SD.2015010	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="440.05"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="10153.69"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 25 OF 28
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Stop Hillary PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political List Brokers	Nature of Debt (Purpose): EST JAN MONTHLY LIST RENTAL FEES
Mailing Address 107 S. West St PMB 826	
City State Zip Code Alexandria VA 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD.201601004	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Washington Times	Nature of Debt (Purpose): Aug/Sept Monthly Digital Advertising
Mailing Address 3600 New York Ave NE	
City State Zip Code Washington DC 20002	

Outstanding Balance Beginning This Period 1576.00	Transaction ID : SD.2015007	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1576.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	11576.00
2) TOTALS This Period (last page this line number only)..... ▶	41320.86
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	41320.86

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC
FEC IDENTIFICATION NUMBER C C00544767
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee American Action News [MEMO ITEM]
Mailing Address 203 S Union St Suite 300
City Alexandria State VA Zip Code 22314
Purpose of Expenditure ESTIMATE OF JANUARY MONTHLY ONLINE ADVERTISING FEES
Name of Federal Candidate Hillary Rodham Clinton Support Oppose
Calendar Year-To-Date Per Election for Office Sought 39618.22

Date of Public Distribution/Dissemination 01/04/2016
Amount 2500.00
Transaction ID : SE24.11744
Date of Disbursement or Obligation 01/04/2016
Office Sought: House District: Senate State:
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Campaign Solutions
Mailing Address 117 N. SAINT ASAPH ST
City Alexandria State VA Zip Code 22314
Purpose of Expenditure JANUARY MONTHLY LIST RENTAL FEES
Name of Federal Candidate Hillary Rodham Clinton Support Oppose
Calendar Year-To-Date Per Election for Office Sought 39618.22

Date of Public Distribution/Dissemination 01/04/2016
Amount 4027.05
Transaction ID : SE24.11740
Date of Disbursement or Obligation 01/31/2016
Office Sought: House District: Senate State:
Disbursement For: Primary General 2016 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4027.05
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) 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.
Dan Backer [Electronically Filed] Date 01/06/2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC	FEC IDENTIFICATION NUMBER ▼ C C00544767
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Campaign Solutions [MEMO ITEM]		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 117 N. SAINT ASAPH ST		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE24.11742
Purpose of Expenditure ESTIMATE OF JANUARY MONTHLY FACEBOOK ADVERTISING		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Hillary Rodham Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
39618.22			

Full Name of Payee Campaign Solutions [MEMO ITEM]		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 117 N. SAINT ASAPH ST		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE24.11741
Purpose of Expenditure JANUARY MONTHLY EXTERNAL DEPLOYMENT COSTS		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Hillary Rodham Clinton		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
39618.22			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

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.

Dan Backer
Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Stop Hillary PAC	FEC IDENTIFICATION NUMBER ▼ C C00544767
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee CD, Inc.	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016
Mailing Address P.O. BOX 1877	Amount 6000.00
City Alexandria State VA Zip Code 22313	Transaction ID : SE24.11743 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 29 / 2016
Purpose of Expenditure JANUARY MONTHLY ONLINE ADVERTISING Category/Type 	Name of Federal Candidate Hillary Rodham Clinton <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 39618.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Political List Brokers [MEMO ITEM]	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016
Mailing Address 107 S. West St PMB 826	Amount 10000.00
City Alexandria State VA Zip Code 22314	Transaction ID : SE24.11745 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 01 / 04 / 2016
Purpose of Expenditure ESTIMATE OF JANUARY MONTHLY LIST RENTAL FEES Category/Type 	Name of Federal Candidate Hillary Rodham Clinton <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 39618.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	6000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	10027.05

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.

Dan Backer [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
01 / 06 / 2016

Signature _____