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PAGE 1 / 11

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FEC FORM 3X	ANI	PORT OF D DISBUE her Than An Au	RSEME	NTS		
1. NAME OF COMMITTEE (in 1		DR PRINT ▼	Example: over the I	If typing, type nes.	12FE4M5	Office Use Only
AdvoCare PAC						
		<u> </u>				
ADDRESS (number and		30x 543846				
Check if diffe than previous reported. (AC	ly Dalla	AS		<u></u>		75354
2. FEC IDENTIFICA		▼ C			STATE	
C C00600726		3.	IS THIS REPORT	NEW (N) OR		ENDED
4. TYPE OF REP (Choose One) (a) Quarterly Rep		Report Due On:	b 20 (M2) ar 20 (M3)	May 20 (M5)		20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15		Ар	r 20 (M4)	Jul 20 (M7)	Oct 2	0 (M10) Jan 31 (YE)
	Report (Q1) (c) 12-Day	Prima	ry (12P)	General (1	2G) Runoff (12R)
	Report (Q2)	PRE-Election Report for the:	Conve	ention (12C)	Special (1	2S)
January 3	Report (Q3) 31 Report (YE)	Elect	ion on	M / D /	Y Y Y Y Y	in the State of
July 31 M Report (N Year Only	Non-election	d) 30-Day POST-Election	Gener	al (30G)	Runoff (30	PR) Special (30S)
Terminati (TER)	on Report	Report for the: Elect	ion on	M / D D /	Y = Y = Y = Y	in the State of
5. Covering Period	07	01 / Y Y Y 01 2017		bugh 12	/ D D / 31	2017
I certify that I have ex	Levy	ort and to the best c y, Allison, , ,	of my knowledge	e and belief it is ti	rue, correct and	complete.
Type or Print Name of	Treasurer					
Signature of Treasurer	Levy, Allison,	,,	[Electr	onically Filed]	Date	/ D D / Y Y Y Y 03 / 2018
NOTE: Submission of fa	alse, erroneous, or	incomplete informati	on may subject t	he person signing	this Report to the	e penalties of 52 U.S.C. § 30109
Office Use Only						FEC FORM 3X Rev. 05/2016

Image# 201805039111751532

FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		
AdvoCare PAC		
Report Covering the Period: From:	07 01 Y Y Y Y T To:	M M / D D / Y Y Y Y Y 12 31 2017
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2017	[13425.15
(b) Cash on Hand at Beginning of Reporting Period	5925.15	
(c) Total Receipts (from Line 19)	38000.00	38000.00
 (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) 	43925.15	51425.15
7. Total Disbursements (from Line 31)	1000.00	8500.00
 Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) 	42925.15	42925.15
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

AdvoCare PAC

Report Covering the Period: From:	/ 01 / 2017 To	b: 12 31 2017
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	38000.00	00000.00
(i) Itemized (use Schedule A)	38000.00	38000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)	38000.00	38000.00
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)		
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	38000.00	38000.00
. Transfers From Affiliated/Other	4 4	41 41 41
Party Committees	0.00	0.00
	494 494 494	
All Loans Received	0.00	0.00
. Loan Repayments Received	0.00	0.00
. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
	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
Total Dessists (add Lines 11(d)		
 Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) 	38000.00	38000.00
L, 10, 14, 10, 10, 17, unu 10(0))		
. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	38000.00	38000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016) Page 4 COLUMN A COLUMN B **II. Disbursements Total This Period Calendar Year-to-Date** 21. Operating Expenditures: Allocated Federal/Non-Federal (a) Activity (from Schedule H4) 0.00 0.00 Federal Share (i) 0.00 0.00 (ii) Non-Federal Share..... (b) Other Federal Operating 0.00 0.00 Expenditures (c) Total Operating Expenditures 0.00 (add 21(a)(i), (a)(ii), and (b)) 0.00 22. Transfers to Affiliated/Other Party Committees..... 0.00 0.00 23 Contributions to Federal Candidates/Committees 8500.00 and Other Political Committees... 1000.00 24. Independent Expenditures (use Schedule E)...... Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... 0.00 0.00 25. 0.00 0.00 26. Loan Repayments Made..... 0.00 0.00 19 Loans Made.... Refunds of Contributions To: (a) Individuals/Persons Other 0.00 27. 28. 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees 0.00 0.00 Other Political Committees (c) (such as PACs)..... 0.00 0.00 Total Contribution Refunds (d) (add Lines 28(a), (b), and (c))...... 0.00 0.00 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 Total Federal Election Activity (add (C) 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)).. 1000.00 8500.00 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... 1000.00 8500.00

DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

Total This Period

FFC	Form	3X	(Rev	05/2016)
1 20	1 01111	57	(110 v.	05/2010	,

III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36)

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		-			-	0.00
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		7			7	38000.00
						0.00
		-7			-7	0.00
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		7			-7	0.00
	1					0.00
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			i.			38000.00
-	-	7	-	-	7	0.00
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		-				38000.00
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		7			-7	0.00
						0.00
÷	÷	-7	÷	÷	-	
						0.00

COLUMN B

Calendar Year-to-Date

Page 5

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`=H9A=N5 H=CB

Form/Schedule: F3XA Transaction ID :

Report is amended to correct the ending and beginning balances of the report as originally filed. The July Mid-Year Report 2017 was amended contemporaneously with this report, and it included an additional disbursement of \$1000. The inclusion of the disbursement decreased the Cash on Hand at Close of Reporting Period for the July Mid-Year Report by \$1000. Consequently, the Cash on Hand at Beginning of Reporting Period for this 2017 Year End Report and the Cash on Hand at Close of Reporting Period for this 2017 Year End Report and the Cash on Hand at Close of Reporting Period decreased by \$1000. No changes were made to the transactions as were originally reported. The PAC has reviewed its process for the preparation and filing of its reports and has adjusted it operations to decrease the likelihood that the same or similar error found in the original 2017 July Mid-Year Report will occur again in the future.

Form/Schedule: Transaction ID:

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

7 OF

ITEMIZED RECEIPTS	-	Use separate schedule(s)	(check only one)		
ILIVIIZED RECEIPIO		for each category of the Detailed Summary Page	✗ 11a 11b 11c 12 13 14 15 16 17		
			Person for the purpose of soliciting contributions e to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) AdvoCare PAC					
 Full Name of Individual (Last, First, Cernicky, Andrew, , , 	Middle Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 500 Bristol Drive			08 01 2017		
City Allen	State TX	Zip Code 75013	Transaction ID : SA11AI.4203 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		5000.00		
Name of Employer (for Individual) AdvoCare International		upation (for Individual) nding Family Member	PAC Contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]		
Full Name of Individual (Last, First, Cernicky, Stacey, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 500 Bristol Drive City Allen	State TX	Zip Code 75013	08 01 Y Y Y Y Y Y 08 01 2017 Transaction ID : SA11AI.4202 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		5000.00		
Name of Employer (for Individual) AdvoCare International		upation (for Individual) nding Family Member	PAC Contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]		
Full Name of Individual (Last, First, Cook, Charles, , ,	Middle Initial) or Full O	rganization Name	Date of Receipt		
Mailing Address 11756 Greenwood			08 / D D / Y Y Y Y 2017		
City Shreveport	State LA	Zip Code 71129	Transaction ID : SA11AI.4190 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		1000.00		
Name of Employer (for Individual) AdvoCare International LP Receipt For: Primary General	Four	upation (for Individual) nding Family Member Year-to-Date ▼ 1000.00	Memo Item PAC Contribution		
Other (specify) SUBTOTAL of Receipts This Page (o	ptional)	ap	11000.00		
TOTAL This Period (last page this lin	e number only)		•		

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE 8 OF

TEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one) $\begin{array}{c} \checkmark \\ 11a \\ 13 \\ 14 \\ 15 \\ 16 \\ 17 \\ 17 \\ 17 \\ 17 \\ 17 \\ 17 \\ 17$		
			erson for the purpose of soliciting contributions to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) AdvoCare PAC					
Full Name of Individual (Last, First, Middle Cook, Courtney, , ,		Organization Name	Date of Receipt		
Mailing Address 11756 Greenwood Spring	ridge Rd		08 01 Y Y Y Y Y 2017		
City Shreveport	State LA	Zip Code 71129	Transaction ID : SA11AI.4198		
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period		
Name of Employer (for Individual)	Occ	upation (for Individual)	Memo Item		
AdvoCare International LP	Fou	inding Family Member	PAC Contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00]		
Full Name of Individual (Last, First, Middle B. Cook, Deborah, , ,	Organization Name	Date of Receipt			
Mailing Address 11756 Greenwood Springr	idge Rd		08 / D D / Y Y Y Y 2017		
City	State	Zip Code	Transaction ID : SA11AI.4194		
Shreveport	LA	71129	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C		5000.00		
Name of Employer (for Individual) AdvoCare International LP		upation (for Individual) Inding Family Member	PAC Contribution		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]		
Full Name of Individual (Last, First, Middle C. Cook, Kelsey, , ,	Initial) or Full C	Organization Name	Date of Receipt		
Mailing Address 11756 Greenwood Spring	ridge Rd		M M / D D / Y Y Y Y 08 01 2017		
City	State LA	Zip Code	Transaction ID : SA11AI.4193		
Shreveport		71129	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		1000.00		
Name of Employer (for Individual)		upation (for Individual)	Memo Item		
AdvoCare International LP		nding Family Member	PAC Contribution		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00]		
SUBTOTAL of Receipts This Page (optional))		7000.00		
TOTAL This Period (last page this line num		· · · · · · · · · · · · · · · · · · ·			

SCHEDULE A (FEC Form 3X)

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PAGE 9 OF

IT	EMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
	ny information copied from such Reports and S for commercial purposes, other than using the			erson for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) AdvoCare PAC			
Α.	Full Name of Individual (Last, First, Middle Init Cook, Louis, , , Mailing Address 11756 Greenwood Springridge	,	rganization Name	Date of Receipt
	City	State	Zip Code	08 01 2017 Transaction ID : SA11AI.4197
	Shreveport	LA	71129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer (for Individual)	Οςςι	pation (for Individual)	Memo Item
	AdvoCare International LP	Four	nding Family Member	PAC Contribution
	Receipt For: Primary General	Aggregate	Year-to-Date 🔻	
	Other (specify) ▼		5000.00]
D	Full Name of Individual (Last, First, Middle Init McGaha, Dalton, , ,	ial) or Full O	rganization Name	Date of Respirit
р.	Mailing Address 6305 Palomino Drive		Date of Receipt	
	City	State	Zip Code	Transaction ID : SA11AI.4200
	Plano	ТХ	75024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		5000.00
	Name of Employer (for Individual) AdvoCare		upation (for Individual) iness Professional	PAC Contribution
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00]
<u>с</u> .	Full Name of Individual (Last, First, Middle Init McGaha, Jennifer, , ,	ial) or Full O	rganization Name	Date of Receipt
	Mailing Address 6305 Palomino Drive			08 / D D / Y Y Y Y Y 2017
	City Plano	State TX	Zip Code 75024	Transaction ID : SA11AI.4199
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period
	Name of Employer (for Individual) AdvoCare		ipation (for Individual) ness Professional	PAC Contribution
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 5000.00]
F	UBTOTAL of Receipts This Page (optional)			15000.00

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 10 OF

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17	
or for commercial purposes, other than us	and Statements may not be sold or used by any p ing the name and address of any political committee	erson for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full) AdvoCare PAC			
Full Name of Individual (Last, First, Mid A. Ragus, Peggy, , , Mailing Address 5539 Prestwick Lane	Date of Receipt		
City Dallas	State Zip Code TX 75252	08 01 2017 Transaction ID : SA11AI.4201 Amount of Food Provint this Paried	
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period	
Name of Employer (for Individual) AdvoCare International Receipt For:	Occupation (for Individual) Founding Family Member	PAC Contribution	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00]	
Full Name of Individual (Last, First, Mid	Date of Receipt		
Mailing Address			
City	State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C		
Name of Employer (for Individual) Occupation (for Individual)		Memo Item	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼]	
Full Name of Individual (Last, First, Mid	dle Initial) or Full Organization Name	Date of Receipt	
Mailing Address			
City	State Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	, ,	
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼]	
SUBTOTAL of Receipts This Page (option	nal)	5000.00	
TOTAL This Period (last page this line nu	umber only)	38000.00	

SCHEDULE B (FEC Form 3X)		proto ochodula(a)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each	arate schedule(s) category of the Summary Page	(check only 21b 28a	one) 22 X 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
AdvoCare PAC				
Full Name (Last, First, Middle Initial) A. TONY CARDENAS FOR CONGR	Date of Disbursement			
Mailing Address 249 E. OCEAN BLVD. SUITE 68	12 08 2017			
City LONG BEACH	State CA	Zip Code 90802		FEC Identification Number
Purpose of Disbursement Campaign Contribution				C C00498873
Candidate Name TONY CARDENAS FOR CONGRESS Category/ Type				Amount of Each Disbursement this Period
Office Sought: X House Disburse Senate X President	ement For: 2 Primary Other (spe	General		1000.00
State: CA District: 29				
Full Name (Last, First, Middle Initial) B. Mailing Address				Date of Disbursement
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name Catego Type				Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President	Senate Primary General			Memo Item
State: District:	_			
Full Name (Last, First, Middle Initial) C.				Date of Disbursement
Mailing Address				
City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				C
Candidate Name Category/ Type				Amount of Each Disbursement this Period
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼				
State: District:	Memo Item			
SUBTOTAL of Disbursements This Page (optional)			····· •	1000.00
TOTAL This Period (last page this line number only	y)		····· •	1000.00