

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

KEEP THE PROMISE III

ADDRESS (number and street) P.O. BOX 92225

Check if different than previously reported. (ACC) AUSTIN TX 78709

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00575423

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:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 05 / 01 / 2016 through M M / D D / Y Y Y Y Y Y 05 / 31 / 2016

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

FRANCIS, JON, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer FRANCIS, JON, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 10 / 27 / 2016

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

KEEP THE PROMISE III

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"/>		11627219.29
(b) Cash on Hand at Beginning of Reporting Period.....	8258102.21	
(c) Total Receipts (from Line 19)	115.00	1847430.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	8258217.21	13474650.13
7. Total Disbursements (from Line 31).....	18649.52	5235082.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	8239567.69	8239567.69
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)

Write or Type Committee Name

KEEP THE PROMISE III

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
05 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
05 / 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).....	0.00	583100.00
(ii) Unitemized	100.00	307166.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	100.00	890266.55
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	835000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	100.00	1725266.55
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).....	15.00	122164.29
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)).....▶	115.00	1847430.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	115.00	1847430.84

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	18649.52	3210550.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18649.52	3210550.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	2024532.37
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	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (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)) ..	18649.52	5235082.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18649.52	5235082.44

DETAILED SUMMARY PAGE
of Disbursements

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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)	100.00	1725266.55
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100.00	1725266.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	18649.52	3210550.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	15.00	122164.29
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18634.52	3088385.78

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
KEEP THE PROMISE III

Full Name (Last, First, Middle Initial) A. AMERICAN EXPRESS		Date of Disbursement MM / DD / YYYY 05 / 04 / 2016
Mailing Address 4315 S 2700 W		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12606 Amount of Each Disbursement this Period 45.65
City SALT LAKE CITY	State UT	Zip Code 84184
Purpose of Disbursement TRANSACTION FEES		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AVIS RENT A CAR		Date of Disbursement MM / DD / YYYY 05 / 27 / 2016
Mailing Address 6 SYLVAN WAY		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12630 Amount of Each Disbursement this Period 216.84
City PARSIPPANY	State NJ	Zip Code 07054
Purpose of Disbursement TRAVEL EXPENSE		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. BANKCARD		Date of Disbursement MM / DD / YYYY 05 / 03 / 2016
Mailing Address PO BOX 2557		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12283 Amount of Each Disbursement this Period 344.82
City OMAHA	State NE	Zip Code 68103
Purpose of Disbursement TRANSACTION FEES		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	607.31
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
KEEP THE PROMISE III

Full Name (Last, First, Middle Initial) A. BERKE FARAH LLP		Date of Disbursement MM / DD / YYYY 05 / 25 / 2016
Mailing Address 1200 NEW HAMPSHIRE AVE STE 800		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12614 Amount of Each Disbursement this Period 4000.00
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement LEGAL FEES		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. BROOKSHIRE BROTHERS		Date of Disbursement MM / DD / YYYY 05 / 31 / 2016
Mailing Address 1201 ELLEN TROUT DR		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12623 Amount of Each Disbursement this Period 60.39
City LUFKIN	State TX	Zip Code 75904
Purpose of Disbursement TRAVEL EXPENSE		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CIRCLE M BBQ		Date of Disbursement MM / DD / YYYY 05 / 02 / 2016
Mailing Address 9003 INTERSTATE 20 ACCESS RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.12281 Amount of Each Disbursement this Period 306.96
City EASTLAND	State TX	Zip Code 76448
Purpose of Disbursement MEETING EXPENSE		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	4367.35
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
KEEP THE PROMISE III

Full Name (Last, First, Middle Initial) A. PLATINUM CIRCLE TECHNOLOGIES			Date of Disbursement MM / DD / YYYY 05 / 16 / 2016	
Mailing Address 4080 THE GATES AT MCGINNIS FERRY			FEC Identification Number C [REDACTED]	
City ALPHARETTA	State GA	Zip Code 30005	Transaction ID : SB21B.12610	
Purpose of Disbursement STRATEGIC PLANNING		Category/ Type 001	Amount of Each Disbursement this Period 5876.25	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PROFESSIONAL DATA SERVICES			Date of Disbursement MM / DD / YYYY 05 / 02 / 2016	
Mailing Address 824 S MILLEDGE AVE STE 101			FEC Identification Number C [REDACTED]	
City ATHENS	State GA	Zip Code 30605	Transaction ID : SB21B.12282	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Amount of Each Disbursement this Period 3500.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES			Date of Disbursement MM / DD / YYYY 05 / 25 / 2016	
Mailing Address 824 S MILLEDGE AVE STE 101			FEC Identification Number C [REDACTED]	
City ATHENS	State GA	Zip Code 30605	Transaction ID : SB21B.12613	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type 001	Amount of Each Disbursement this Period 3500.00	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

12876.25

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

KEEP THE PROMISE III

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLAS

State
TN

Zip Code
75235

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12615
Amount of Each Disbursement this Period
447.96

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLAS

State
TN

Zip Code
75235

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 25 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12632
Amount of Each Disbursement this Period
30.00

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12607
Amount of Each Disbursement this Period
73.26

Memo Item

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

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

551.22

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

KEEP THE PROMISE III

Full Name (Last, First, Middle Initial)

A. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12611
Amount of Each Disbursement this Period
5.00

Memo Item

Full Name (Last, First, Middle Initial)

B. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12619
Amount of Each Disbursement this Period
19.17

Memo Item

Full Name (Last, First, Middle Initial)

C. UBER TECHNOLOGIES

Mailing Address 1455 MARKET ST

City
SAN FRANCISCO

State
CA

Zip Code
94103

Purpose of Disbursement
TRAVEL EXPENSE

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 27 / 2016

FEC Identification Number

C
Transaction ID : SB21B.12617
Amount of Each Disbursement this Period
20.47

Memo Item

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

44.64

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

18446.77