



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Atlantic Tele-Network Political Action Committee**

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="2015"/>	<input type="text" value="39233.55"/>	<input type="text" value="39233.55"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="39233.55"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="10361.00"/>	<input type="text" value="10361.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="49594.55"/>	<input type="text" value="49594.55"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7500.00"/>	<input type="text" value="7500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="42094.55"/>	<input type="text" value="42094.55"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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. 06/2004)

Write or Type Committee Name

**Atlantic Tele-Network Political Action Committee**

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

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).....	9392.50	9392.50
(ii) Unitemized .....	968.50	968.50
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	10361.00	10361.00
(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) .....	10361.00	10361.00
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.).....	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))..... ▶	10361.00	10361.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	10361.00	10361.00

**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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	7500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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 .....	0.00	0.00
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)) ..	7500.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7500.00	7500.00

**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) .....	10361.00	10361.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	10361.00	10361.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 11
<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

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)  
**Atlantic Tele-Network Political Action Committee**

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City State Zip Code  
Beverly MA 01915

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

Name of Employer Occupation  
Atlantic Tele-Network, Inc. Chief Financial Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2015

**Transaction ID : SA11AI.4819**

Amount of Each Receipt this Period  
1300.00

Bi-Weekly payroll contribution of \$100.00

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City State Zip Code  
Beverly MA 01915

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

Name of Employer Occupation  
Atlantic Tele-Network, Inc. Vice President - Planning and Dev.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
520.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2015

**Transaction ID : SA11AI.4822**

Amount of Each Receipt this Period  
520.00

Bi-Weekly payroll contribution of \$40.00

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City State Zip Code  
Beverly MA 01915

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

Name of Employer Occupation  
Atlantic Tele-Network, Inc. VP, Tech Solutions

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  
MM / DD / YYYY  
06 / 18 / 2015

**Transaction ID : SA11AI.4823**

Amount of Each Receipt this Period  
260.00

Bi-Weekly payroll contribution of \$20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2080.00

**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 7 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Atlantic Tele-Network Political Action Committee**

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City Beverly State MA Zip Code 01915

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

Name of Employer Atlantic Tele-Network, Inc. Occupation Vice President - Tax

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **06 / 18 / 2015**

**Transaction ID : SA11AI.4824**

Amount of Each Receipt this Period **390.00**

Bi-Weekly payroll contribution of \$30.00

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City Beverly State MA Zip Code 01915

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

Name of Employer Atlantic Tele-Network, Inc. Occupation Vice President - Accounting

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **06 / 18 / 2015**

**Transaction ID : SA11AI.4826**

Amount of Each Receipt this Period **260.00**

Bi-Weekly payroll contribution of \$20.00

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

Mailing Address c/o Atlantic Tele-Network, Inc.  
600 Cummings Center

City Beverly State MA Zip Code 01915

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

Name of Employer Atlantic Tele-Network, Inc. Occupation VP, Roaming Ops & Billing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **910.00**

Date of Receipt **06 / 18 / 2015**

**Transaction ID : SA11AI.4827**

Amount of Each Receipt this Period **910.00**

Bi-Weekly payroll contribution of \$70.00

**SUBTOTAL** of Receipts This Page (optional)..... **1560.00**

**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 11
<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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NAME OF COMMITTEE (In Full)  
**Atlantic Tele-Network Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Barry Fougere</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2015 <b>Transaction ID : SA11AI.4828</b>
Mailing Address c/o Atlantic Tele-Network, Inc. 600 Cummings Center		Amount of Each Receipt this Period 780.00
City Beverly	State MA	Zip Code 01915
FEC ID number of contributing federal political committee. C	Bi-Weekly payroll contribution of \$60.00	
Name of Employer Atlantic Tele-Network, Inc.	Occupation SVP - Business Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 780.00	

Full Name (Last, First, Middle Initial) <b>B. Mark Hlavek</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2015 <b>Transaction ID : SA11AI.4829</b>
Mailing Address c/o Atlantic Tele-Network, Inc. 600 Cummings Center		Amount of Each Receipt this Period 1001.00
City Beverly	State MA	Zip Code 01915
FEC ID number of contributing federal political committee. C	Bi-Weekly payroll contribution of \$77.00	
Name of Employer Atlantic Tele-Network, Inc.	Occupation VP, Accounting & Billing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1001.00	

Full Name (Last, First, Middle Initial) <b>C. Joshua Holbrook</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2015 <b>Transaction ID : SA11AI.4830</b>
Mailing Address c/o Atlantic Tele-Network, Inc. 600 Cummings Center		Amount of Each Receipt this Period 552.50
City Beverly	State MA	Zip Code 01915
FEC ID number of contributing federal political committee. C	Bi-Weekly payroll contribution of \$42.50	
Name of Employer Atlantic Tele-Network, Inc.	Occupation Vice President, Business Planning	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 552.50	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2333.50
<b>TOTAL</b> 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 9 OF 11
<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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NAME OF COMMITTEE (In Full)  
**Atlantic Tele-Network Political Action Committee**

**A. William Kreisher**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address c/o Atlantic Tele-Netowork, Inc.  
 600 Cummings Center  
 City State Zip Code  
 Beverly MA 01915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Atlantic Tele-Network, Inc. Senior Vice President - Corporate Dev.  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4831**  
 Amount of Each Receipt this Period  
 1430.00  
 Bi-Weekly payroll contribution of \$110.00

**B. Douglas J. Minster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address c/o Atlantic Tele-Network, Inc.  
 600 Cummings Center  
 City State Zip Code  
 Beverly MA 01915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Atlantic Tele-Network, Inc. VP, Gov't & Regulatory  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 754.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4833**  
 Amount of Each Receipt this Period  
 754.00  
 Bi-Weekly payroll contribution of \$58.00

**C. Louis Tomasetti**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address c/o Atlantic Tele-Network, Inc.  
 600 Cummings Center  
 City State Zip Code  
 Beverly MA 01915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Atlantic Tele-Network, Inc. Vice President, Roaming  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 18 / 2015  
**Transaction ID : SA11AI.4836**  
 Amount of Each Receipt this Period  
 1235.00  
 Bi-Weekly payroll contribution of \$95.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3419.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9392.50

**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 checked="" 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)  
**Atlantic Tele-Network Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. ANNA ESHOO FOR CONGRESS**

Mailing Address 555 CAPITOL MALL, SUITE 1425

City State Zip Code  
SACRAMENTO CA 95814

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**ANNA ESHOO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		12		2015

**Transaction ID : SB23.4838**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. COMPETITIVE CARRIERS ASSOCIATION PAC (CCA PAC)**

Mailing Address 805 15TH STREET NW  
SUITE 401

City State Zip Code  
WASHINGTON DC 20005

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2015

**Transaction ID : SB23.4840**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MIKE LEE INC**

Mailing Address 10 WEST BROADWAY  
SUITE 500

City State Zip Code  
SALT LAKE CITY UT 84101

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**MIKE LEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: UT District: 00

Date of Disbursement

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

**Transaction ID : SB23.4841**

Amount of Each Disbursement this Period

1000.00
---------

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

5500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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**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 checked="" 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)  
**Atlantic Tele-Network Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. WALDEN FOR CONGRESS**

Mailing Address P.O. Box 1091

City Hood River State OR Zip Code 97031

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name  
**GREGORY P. WALDEN**

Office Sought:  House  
 Senate  
 President  
State: OR District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.4839

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

2000.00

7500.00