

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**
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) **250 PARK AVE**
Check if different than previously reported. (ACC) **NEW YORK NY 10177**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00380527 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 **06 / 12 / 2018** in the State of **ND**
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period **04 / 01 / 2018** through **05 / 23 / 2018**

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

Type or Print Name of Treasurer _____

Signature of Treasurer **SATTERFIELD, DAVID, , ,** [Electronically Filed] Date **05 / 31 / 2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

PERNOD RICARD USA, LLC 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="2018"/>		97664.54
(b) Cash on Hand at Beginning of Reporting Period.....	102112.54	
(c) Total Receipts (from Line 19)	1224.00	3672.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	103336.54	101336.54
7. Total Disbursements (from Line 31).....	13500.00	11500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	89836.54	89836.54
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

Write or Type Committee Name

PERNOD RICARD USA, LLC 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).....	275.00	375.00
(ii) Unitemized	949.00	3297.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1224.00	3672.00
(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)	1224.00	3672.00
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)).....▶	1224.00	3672.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1224.00	3672.00

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.....	13500.00	12500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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	- 1000.00
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)) ..	13500.00	11500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13500.00	11500.00

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)	1224.00	3672.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1224.00	3672.00
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)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

A. ENGEL, TARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 MANHATTANVILLE RD

City PURCHASE	State NY	Zip Code 10577-2134
------------------	-------------	------------------------

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

Name of Employer (for Individual) PERNOD RICARD USA, LLC	Occupation (for Individual) DIRECTOR
---	---

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
04	/	15	/	2018

Transaction ID : A1963D6CCF1434DFBAC3

Amount of Each Receipt this Period
50.00

Memo Item

B. ENGEL, TARA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 MANHATTANVILLE RD

City PURCHASE	State NY	Zip Code 10577-2134
------------------	-------------	------------------------

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

Name of Employer (for Individual) PERNOD RICARD USA, LLC	Occupation (for Individual) DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2018

Transaction ID : A72619A3562AD42E4B17

Amount of Each Receipt this Period
50.00

Memo Item

C. WALKERWICZ, STEVEN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 MANHATTANVILLE RD

City PURCHASE	State NY	Zip Code 10577-2134
------------------	-------------	------------------------

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

Name of Employer (for Individual) PERNOD RICARD USA, LLC	Occupation (for Individual) DIRECTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2018

Transaction ID : A54881DD631234FB1858

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
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"/> 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)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

A. GLAZEWSKI, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MANHATTANVILLE RD
 City PURCHASE State NY Zip Code 10577-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERNOD RICARD USA, LLC Occupation (for Individual) DISTRICT MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : A168342561D1F4167BBD
 Amount of Each Receipt this Period
 25.00
 Memo Item

B. ENGEL, TARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MANHATTANVILLE RD
 City PURCHASE State NY Zip Code 10577-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERNOD RICARD USA, LLC Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : A52F301EB031346AF814
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. HIGGINS, SHAWN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MANHATTANVILLE RD
 City PURCHASE State NY Zip Code 10577-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERNOD RICARD USA, LLC Occupation (for Individual) GENERAL MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : A5A6ADA13843E43A3815
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

A. HANESWORTH, MELISSA, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MANHATTANVILLE RD
 City PURCHASE State NY Zip Code 10577-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERNOD RICARD USA, LLC Occupation (for Individual) MANAGING DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 15 / 2018
Transaction ID : AE9B45C7037194EC3ADC
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KELLY, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 MANHATTANVILLE RD
 City PURCHASE State NY Zip Code 10577-2134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERNOD RICARD USA, LLC Occupation (for Individual) WINE & CHAMPAGNE DIRECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 15 / 2018
Transaction ID : A2094026813294B7E94C
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	275.00

**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 checked="" 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)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

A. HEIDI FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1577

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement CONTRIBUTION

Candidate Name HEITKAMP, HEIDI, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: ND District:

Date of Disbursement: 05 / 16 / 2018

FEC Identification Number: C00505552
Transaction ID : BC002E208C
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BRADY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 8277

City THE WOODLANDS State TX Zip Code 77387

Purpose of Disbursement CONTRIBUTION

Candidate Name BRADY, KEVIN, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: TX District: 08

Date of Disbursement: 04 / 12 / 2018

FEC Identification Number: C00311043
Transaction ID : B92233A12A
Amount of Each Disbursement this Period: 1500.00

Memo Item

C. BILL CASSIDY FOR US SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 80505

City BATON ROUGE State LA Zip Code 70898

Purpose of Disbursement CONTRIBUTION

Candidate Name CASSIDY, WILLIAM, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: LA District:

Date of Disbursement: 04 / 12 / 2018

FEC Identification Number: C00543983
Transaction ID : B4317BADF
Amount of Each Disbursement this Period: 1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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 checked="" 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)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

A. FRENCH HILL FOR ARKANSAS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement CONTRIBUTION

Candidate Name HILL, JAMES, FRENCH, ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: AR District: 02

Date of Disbursement: 05 / 21 / 2018

FEC Identification Number: C C00551275
Transaction ID : BC59A38064
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. BIG SKY OPPORTUNITY PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1618

City HELENA State MT Zip Code 59624

Purpose of Disbursement CONTRIBUTION

Candidate Name BIG SKY OPPORTUNITY PAC

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) OTHER

State: District:

Date of Disbursement: 04 / 12 / 2018

FEC Identification Number: C C00542027
Transaction ID : B8CE7427664
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. DISTILLED SPIRITS COUNCIL OF THE UNITED STATES INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1250 EYE STREET, NW STE 400

City WASHINGTON State DC Zip Code 20005-5977

Purpose of Disbursement 2018 CONTRIBUTION

Candidate Name

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) OTHER

State: District:

Date of Disbursement: 04 / 12 / 2018

FEC Identification Number: C
Transaction ID : BBC0C09952
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

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

7000.00

**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 checked="" 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)
PERNOD RICARD USA, LLC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. MCCONNELL FOR MAJORITY LEADER COMMITTEE		Date of Disbursement MM / DD / YYYY 05 / 16 / 2018
Mailing Address 228 S WASHINGTON ST STE 115		FEC Identification Number C 000548651 Transaction ID : B9719CE0BF Amount of Each Disbursement this Period 2500.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement CONTRIBUTION		Category/ Type
Candidate Name MCCONNELL FOR MAJORITY LEADER COMMITTEE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ OTHER	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Amount of Each Disbursement this Period		
City	State	Zip Code
Purpose of Disbursement		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)	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Amount of Each Disbursement this Period		
City	State	Zip Code
Purpose of Disbursement		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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	13500.00