

# 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

ESOP PAC

ADDRESS (number and street) 1200 18th Street, N.W.  
Suite 1125  
 Check if different than previously reported. (ACC) Washington DC 20036

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

C C00196089

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2016 through 09 / 30 / 2016

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

Keeling, J. Michael, , Esq.

Type or Print Name of Treasurer

Signature of Treasurer Keeling, J. Michael, , Esq. [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 10 / 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

**ESOP 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"/>	<input type="text"/>	<input type="text" value="11570.25"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="816.55"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="26743.75"/>	<input type="text" value="83206.25"/>
(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="27560.30"/>	<input type="text" value="94776.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22906.57"/>	<input type="text" value="90122.77"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4653.73"/>	<input type="text" value="4653.73"/>
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. 05/2016)

Write or Type Committee Name

**ESOP PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2016 To: M M / D D / Y Y Y Y 09 / 30 / 2016

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	7650.00	50560.00
(ii) Unitemized .....	19093.75	27146.25
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	26743.75	77706.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	26743.75	83206.25
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)).....▶	26743.75	83206.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	26743.75	83206.25

**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.....	22700.00	87890.00
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).....	206.57	2232.77
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)) ..	22906.57	90122.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22906.57	90122.77

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	26743.75	83206.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	26743.75	83206.25
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 17
<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)  
**ESOP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Armstrong, Bruce, , Mr.,</b>		Date of Receipt MM / DD / YYYY 08 / 09 / 2016
Mailing Address 300 Harvard Road		<b>Transaction ID : SA11AI.9097</b>
City San Mateo	State CA	Zip Code 94402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer (for Individual) Menke & Associates	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Bloom, William, S., Mr.,</b>		Date of Receipt MM / DD / YYYY 08 / 09 / 2016
Mailing Address 155 North Wacker Drive		<b>Transaction ID : SA11AI.9098</b>
City Chicago	State IL	Zip Code 60606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Chartwell Capital Solutions	Occupation (for Individual) investment banker	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Isaacks, Wayne, , Mr.,</b>		Date of Receipt MM / DD / YYYY 08 / 24 / 2016
Mailing Address 12777 Jones Road Suite 100		<b>Transaction ID : SA11AI.9094</b>
City Houston	State TX	Zip Code 77070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Isaacks & Associates, LTD, LLP	Occupation (for Individual) consultant	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<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 7 OF 17
<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)  
**ESOP PAC**

**A. Kramer, Christopher, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 Hutton Centre Drive

City Santa Ana	State CA	Zip Code 92707
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Strategic Equity Group	Occupation (for Individual) valuation advisor
---	--

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
07		22		2016

**Transaction ID : SA11AI.9104**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. Locke, Dennis, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 999 Third Avenue  
Suite 2800

City Seattle	State WA	Zip Code 98104
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Moss Adams LLP	Occupation (for Individual) principal
---	--

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
08		09		2016

**Transaction ID : SA11AI.9096**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Menke, John W., , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 170 Estates Drive

City Piedmont	State CA	Zip Code 94611
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Menke & Associates	Occupation (for Individual) attorney
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2016

**Transaction ID : SA11AI.9101**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<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 8 OF 17
<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)  
**ESOP PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Mericka, Keith, A., Mr.,</b>			Date of Receipt MM / DD / YYYY 07 / 26 / 2016
Mailing Address 3455 Peachtree Road, N.E.			<b>Transaction ID : SA11AI.9102</b>
City Atlanta	State GA	Zip Code 30326	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) UBS Financial Services		Occupation (for Individual) financial advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Murphy, John, P., Mr.,</b>			Date of Receipt MM / DD / YYYY 09 / 14 / 2016
Mailing Address 875 Greenland Road Unite A 12			<b>Transaction ID : SA11AI.9092</b>
City Portsmouth	State NH	Zip Code 03801-7124	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) Atlantic Management Company, I		Occupation (for Individual) consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Nelson, Steven, J., Mr.,</b>			Date of Receipt MM / DD / YYYY 07 / 26 / 2016
Mailing Address 527 Marquette Avenue 17th Floor R			<b>Transaction ID : SA11AI.9103</b>
City Minneapolis	State MN	Zip Code 55402-1302	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item	
Name of Employer (for Individual) Chartwell Financial Advisory		Occupation (for Individual) investment banker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2000.00
<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 17
<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)  
**ESOP PAC**

**A. O'Brien, John, C., Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Pierce Place  
Suite 41 SE

City Itasca State IL Zip Code 60143-2673

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

Name of Employer (for Individual) Occupation (for Individual)  
ComStock Advisors valuation consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2016

**Transaction ID : SA11AI.9088**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. Reynolds, Hugh, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 West Broad Street  
Suite 1700

City Columbus State OH Zip Code 43215

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

Name of Employer (for Individual) Occupation (for Individual)  
Crowe Chizek & Company, LLP consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 24 / 2016

**Transaction ID : SA11AI.9095**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. Swerdlin, Joanne, , Ms.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5901 Peachtree Dunwoody Road  
Bldg. B - Suite 170

City Atlanta State GA Zip Code 30328

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

Name of Employer (for Individual) Occupation (for Individual)  
Swerdlin & Company Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
07 / 21 / 2016

**Transaction ID : SA11AI.9105**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	7650.00

**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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial) <b>A. ADAM SMITH FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 578		FEC Identification Number C [ ] <b>Transaction ID : SB23.9118</b>
City RENTON	State WA	Zip Code 98057
Purpose of Disbursement		Amount of Each Disbursement this Period [ ] 1000.00
Candidate Name		Category/Type [ ]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WA District: 09		

Full Name (Last, First, Middle Initial) <b>B. BEN CARDIN FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address 100 EAST PRATT STREET 27TH FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB23.9140</b>
City BALTIMORE	State MD	Zip Code 21202
Purpose of Disbursement		Amount of Each Disbursement this Period [ ] 1500.00
Candidate Name		Category/Type [ ]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MD District: 03		

Full Name (Last, First, Middle Initial) <b>C. BOUSTANY FOR SENATE INC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 80126		FEC Identification Number C [ ] <b>Transaction ID : SB23.9123</b>
City LAFAYETTE	State LA	Zip Code 70598
Purpose of Disbursement		Amount of Each Disbursement this Period [ ] 1000.00
Candidate Name		Category/Type [ ]
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff	<input type="checkbox"/> Memo Item
State: LA District: 00		

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

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

[ ] 3500.00
[ ]

**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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial) <b>A. CRAMER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 396		FEC Identification Number C [ ] <b>Transaction ID : SB23.9131</b> Amount of Each Disbursement this Period [ ] 500.00
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement	Candidate Name	Category/Type [ ]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ND	District: 01	

Full Name (Last, First, Middle Initial) <b>B. DOLD FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address PO BOX 6312		FEC Identification Number C [ ] <b>Transaction ID : SB23.9135</b> Amount of Each Disbursement this Period [ ] 1000.00
City LIBERTYVILLE	State IL	Zip Code 60048
Purpose of Disbursement	Candidate Name	Category/Type [ ]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IL	District: 10	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF DAVE REICHERT</b>		Date of Disbursement MM / DD / YYYY 08 / 17 / 2016
Mailing Address P. O. Box 53322		FEC Identification Number C [ ] <b>Transaction ID : SB23.9133</b> Amount of Each Disbursement this Period [ ] 1000.00
City Bellevue	State WA	Zip Code 98015
Purpose of Disbursement	Candidate Name	Category/Type [ ]
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WA	District: 08	

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

[ ] 2500.00

**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)  
**ESOP PAC**

**A. FRIENDS OF ERIK PAULSEN**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 44369  
250 PRAIRIE CENTER DRIVE

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: MN District: 03

Date of Disbursement: MM / DD / YYYY  
07 / 26 / 2016

FEC Identification Number:  C

Transaction ID : **SB23.9110**

Amount of Each Disbursement this Period:  2700.00

Memo Item

**B. Friends of John McCain**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 16664

City ARLINGTON State VA Zip Code 22215

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: AZ District: 00

Date of Disbursement: MM / DD / YYYY  
09 / 06 / 2016

FEC Identification Number:  C

Transaction ID : **SB23.9138**

Amount of Each Disbursement this Period:  1000.00

Memo Item

**C. FRIENDS OF PAT TOOMEY**

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST., SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: PA District: 00

Date of Disbursement: MM / DD / YYYY  
08 / 17 / 2016

FEC Identification Number:  C

Transaction ID : **SB23.9134**

Amount of Each Disbursement this Period:  1500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶  5200.00

**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)  
**ESOP PAC**

**A. GRAVES FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 2345 GRAND, SUITE 2400

City KANSAS CITY State MO Zip Code 64108

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify) ▼  
 State: MO District: 06

Date of Disbursement

/  /   
08 / 16 / 2016

FEC Identification Number

C   
**Transaction ID : SB23.9126**  
 Amount of Each Disbursement this Period  
 500.00

Memo Item

**B. JIM RENACCI FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 150 SMOKERISE DRIVE

City WADSWORTH State OH Zip Code 44281

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify) ▼  
 State: OH District: 16

Date of Disbursement

/  /   
08 / 08 / 2016

FEC Identification Number

C   
**Transaction ID : SB23.9111**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

**C. KELLY PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N WASHINGTON STREET  
SUITE 102

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2016  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

/  /   
09 / 20 / 2016

FEC Identification Number

C   
**Transaction ID : SB23.9141**  
 Amount of Each Disbursement this Period  
 1000.00

Memo Item

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

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

2500.00

**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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial) <b>A. KUSTER FOR CONGRESS, INC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 1498		FEC Identification Number C [ ] <b>Transaction ID : SB23.9122</b> Amount of Each Disbursement this Period [ ] 500.00
City CONCORD	State NH	Zip Code 03302
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NH	District: 02	

Full Name (Last, First, Middle Initial) <b>B. LEVIN FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address 30636 DEQUINDRE		FEC Identification Number C [ ] <b>Transaction ID : SB23.9120</b> Amount of Each Disbursement this Period [ ] 1000.00
City WARREN	State MI	Zip Code 48092
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: MI	District: 12	

Full Name (Last, First, Middle Initial) <b>C. MONTANANS FOR TESTER</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address PO BOX 1135		FEC Identification Number C [ ] <b>Transaction ID : SB23.9116</b> Amount of Each Disbursement this Period [ ] 2500.00
City HELENA	State MT	Zip Code 59624
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MT	District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4000.00
<b>TOTAL</b> 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial) <b>A. PARAGRAPH TWO PAC</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2016
Mailing Address 2631 WILLOW LAKE DR		FEC Identification Number C [ ] <b>Transaction ID : SB23.9136</b> Amount of Each Disbursement this Period [ ] 500.00
City GREENWOOD	State IN	Zip Code 46143
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PROMOTING OUR REPUBLICAN TEAM PAC</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2016
Mailing Address 8331 LITTLE HARBOR DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB23.9121</b> Amount of Each Disbursement this Period [ ] 1000.00
City CINCINNATI	State OH	Zip Code 45244
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. RICHARD E NEAL FOR CONGRESS COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2016
Mailing Address 76 MAGNOLIA TERRACE		FEC Identification Number C [ ] <b>Transaction ID : SB23.9139</b> Amount of Each Disbursement this Period [ ] 1000.00
City SPRINGFIELD	State MA	Zip Code 01108
Purpose of Disbursement	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

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

[ ] 2500.00
[ ]

**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)  
**ESOP PAC**

**A. RODNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: IL District: 13

Date of Disbursement: 08 / 16 / 2016

FEC Identification Number:  C

Transaction ID : SB23.9129

Amount of Each Disbursement this Period: 500.00

Memo Item

**B. TIBERI FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2931 E DUBLIN GRANVILLE ROAD SUITE 190

City COLUMBUS State OH Zip Code 43231

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: OH District: 12

Date of Disbursement: 08 / 16 / 2016

FEC Identification Number:  C

Transaction ID : SB23.9119

Amount of Each Disbursement this Period: 1500.00

Memo Item

**C. ZINKE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1596

City HELENA State MT Zip Code 59624

Purpose of Disbursement  Category/Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼

State: MT District: 01

Date of Disbursement: 08 / 16 / 2016

FEC Identification Number:  C

Transaction ID : SB23.9124

Amount of Each Disbursement this Period: 500.00

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	22700.00

**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"/> 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)  
**ESOP PAC**

Full Name (Last, First, Middle Initial)

**A. Bank Charges**

Mailing Address P.O. Box 96758  
1800 M Street, N.W.

City Washington State DC Zip Code 20090

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

/  /   
09 / 30 / 2016

FEC Identification Number

C

**Transaction ID : SB29.9084**  
Amount of Each Disbursement this Period

206.57

Memo Item

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

/  /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

/  /

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

206.57

206.57