

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

ESAFund

ADDRESS (number and street) 610 S. Boulevard

Check if different than previously reported. (ACC) Tampa FL 33606

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

C C00489856

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 checked="" type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on 12 / 10 / 2016 in the State of LA

- (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 / / in the State of

5. Covering Period 10 / 20 / 2016 through 11 / 20 / 2016

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

Watkins, Nancy H., , ,

Type or Print Name of Treasurer

Signature of Treasurer Watkins, Nancy H., , , [Electronically Filed] Date 11 / 28 / 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

ESAFund

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"/>		1342450.76
(b) Cash on Hand at Beginning of Reporting Period.....	8148680.23	
(c) Total Receipts (from Line 19)	446882.19	13482986.11
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	8595562.42	14825436.87
7. Total Disbursements (from Line 31).....	8156525.10	14386399.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	439037.32	439037.32
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

ESAFund

Report Covering the Period: From: MM / DD / YYYY 10 / 20 / 2016 To: MM / DD / YYYY 11 / 20 / 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).....	288183.28	9175121.00
(ii) Unitemized	199.00	204.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	288382.28	9175325.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	4154964.20
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	298382.28	13330289.20
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).....	148499.91	152696.91
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)).....▶	446882.19	13482986.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	446882.19	13482986.11

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	-76310.45	561625.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	-76310.45	561625.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	375000.00
24. Independent Expenditures (use Schedule E)	8207835.55	13429773.97
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	20000.00
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)) ..	8156525.10	14386399.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8156525.10	14386399.55

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)	298382.28	13330289.20
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	298382.28	13330289.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-76310.45	561625.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	148499.91	152696.91
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-224810.36	408928.67

**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 46
<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)
ESAFund

A. Air Vac, Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address P. O. Box 1967

City Iowa	State LA	Zip Code 70647
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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 ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2016

Transaction ID : SA11AI.7295

Amount of Each Receipt this Period
25000.00

Memo Item

B. Childs, John, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 Totten Pond Road Suite 6

City Waltham	State MA	Zip Code 02451
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
J. W. Childs Associates, L.P. c.e.o/founder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA11AI.7240

Amount of Each Receipt this Period
25000.00

Memo Item

C. Ending Spending, Inc.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 815 Slaters Lane

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

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 ▼
146621.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2016

Transaction ID : SA11AI.7151

Amount of Each Receipt this Period
26683.28

Memo Item
In-kind - payroll/admin

SUBTOTAL of Receipts This Page (optional).....▶	76683.28
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 46
<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)
ESAFund

A. Flores, James C., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. Box 1083
 City Houston State TX Zip Code 77251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Sable Minerals, Inc. Occupation (for Individual) president
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 11 / 17 / 2016
Transaction ID : SA11AI.7297
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. Heard, Daniel, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. Box 83255
 City Baton Rouge State LA Zip Code 70884
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) John H. Carter Co., Inc. Occupation (for Individual) executive officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 10 / 2016
Transaction ID : SA11AI.7262
 Amount of Each Receipt this Period 25000.00
 Memo Item

C. LeBlanc, Shirley, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. Box 33
 City Saint Gabriel State LA Zip Code 70776
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 07 / 2016
Transaction ID : SA11AI.7237
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	85000.00
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 46
	<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)
ESAFund

A. MCNA Health Care Holdings, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W. Cypress Creek Road, #500
 City Fort Lauderdale State FL Zip Code 33309
 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 ▼ 5000.00

Date of Receipt **11 / 17 / 2016**
Transaction ID : SA11AI.7299
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Mosing, Greg, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 308 Sawgrass Lane
 City Broussard State LA Zip Code 70518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual) n/a retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 20 / 2016**
Transaction ID : SA11AI.7067
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Port Aggregates, Inc. NA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 North Main Street
 City Jennings State LA Zip Code 70546
 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 ▼ 5000.00

Date of Receipt **11 / 10 / 2016**
Transaction ID : SA11AI.7265
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 9 OF 46
<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)
ESAFund

A. Rayes, Patrick O., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P. O. Box 195429
 City Dallas State TX Zip Code 75219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) oil/gas executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 20 / 2016
Transaction ID : SA11AI.7301
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Ricketts, Donavon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2464 S. 182nd Circle
 City Omaha State NE Zip Code 68130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) n/a Occupation (for Individual) retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 12 / 2016
Transaction ID : SA11AI.7268
 Amount of Each Receipt this Period 1500.00
 Memo Item

c. Schilling Distributing Company, Inc.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Moss Street
 City Lafayette State LA Zip Code 70501
 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 ▼ 5000.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11AI.7270
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11500.00
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 10 OF 46
	<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)
ESAFund

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Sher Garner Cahill Richter Klein & Hilbert, LLC		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2016
Mailing Address 909 Poydras Street		Transaction ID : SA11AI.7289
City New Orleans	State LA	Zip Code 70112
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Silverman, Jeffrey, L., ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2016
Mailing Address 132 E. Delaware Place. #6602		Transaction ID : SA11AI.7247
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50000.00
Name of Employer (for Individual) Silverman Investing, LLC	Occupation (for Individual) investing	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Wampold, Milford, , ,		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2016
Mailing Address 4171 Essen Lane, #401		Transaction ID : SA11AI.7266
City Baton Rouge	State LA	Zip Code 70809
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer (for Individual) Wampold Companies	Occupation (for Individual) c.e.o.	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 25000.00	

SUBTOTAL of Receipts This Page (optional).....	100000.00
TOTAL This Period (last page this line number only).....	288183.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 46
 (check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
ESAFund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Amedisys PAC, LLC

Mailing Address 5959 S. Sherwood Forrest Blvd.

City Baton Rouge	State LA	Zip Code 70816
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2016

Transaction ID : SA11C.7293

Amount of Each Receipt this Period
 10000.00

Memo Item

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

Mailing Address

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

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

**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 12 OF 46
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
ESAFund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CD, Inc.

Mailing Address P. O. Box 1877

City Alexandria	State VA	Zip Code 22313
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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 ▼
148499.91

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2016

Transaction ID : SA15.7104

Amount of Each Receipt this Period
148499.91

Memo Item
refund online advertising-not disseminated

B. 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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

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

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	148499.91
TOTAL This Period (last page this line number only).....	148499.91

**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)
ESAFund

A. eDonations

Full Name (Last, First, Middle Initial)

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 21 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.7075**

Amount of Each Disbursement this Period: 775.35

Memo Item

B. eDonations

Full Name (Last, First, Middle Initial)

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement online fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 02 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.7188**

Amount of Each Disbursement this Period: 323.09

Memo Item

C. Ending Spending, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement In-kind - payroll/admin

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: C

Transaction ID : **SB21B.7152**

Amount of Each Disbursement this Period: 26683.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 27781.72

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)
ESAFund

Full Name (Last, First, Middle Initial)
A. KyZle.com, LLC

Mailing Address P. O. Box 1813

City Warsaw State IN Zip Code 46581

Purpose of Disbursement advertising-non IE

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
10 / 27 / 2016

FEC Identification Number
C
Transaction ID : SB21B.7105
Amount of Each Disbursement this Period
18900.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Mentzer Media Services, Inc.

Mailing Address 600 Fairmount Avenue, #306

City Towson State MD Zip Code 21286

Purpose of Disbursement media placement-not disseminated

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
10 / 24 / 2016

FEC Identification Number
C
Transaction ID : SB21B.7079
Amount of Each Disbursement this Period
5892.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mentzer Media Services, Inc.

Mailing Address 600 Fairmount Avenue, #306

City Towson State MD Zip Code 21286

Purpose of Disbursement media placement-See Line 24

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
11 / 01 / 2016

FEC Identification Number
C
Transaction ID : SB21B.7176
Amount of Each Disbursement this Period
-9644.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15148.00

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 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)
ESAFund

Full Name (Last, First, Middle Initial)
A. Mentzer Media Services, Inc.

Date of Disbursement: MM / DD / YYYY
11 / 01 / 2016

Mailing Address 600 Fairmount Avenue, #306

City Towson State MD Zip Code 21286

Purpose of Disbursement media placement-See Line 24

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.7185
Amount of Each Disbursement this Period: -172.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Mentzer Media Services, Inc.

Date of Disbursement: MM / DD / YYYY
11 / 02 / 2016

Mailing Address 600 Fairmount Avenue, #306

City Towson State MD Zip Code 21286

Purpose of Disbursement media placement-not disseminated

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.7195
Amount of Each Disbursement this Period: 20.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Mentzer Media Services, Inc.

Date of Disbursement: MM / DD / YYYY
11 / 03 / 2016

Mailing Address 600 Fairmount Avenue, #306

City Towson State MD Zip Code 21286

Purpose of Disbursement media placement-not disseminated

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB21B.7212
Amount of Each Disbursement this Period: 90.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -62.00

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 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)
ESAFund

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services, Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2016			

Mailing Address 600 Fairmount Avenue, #306

FEC Identification Number

C []

Transaction ID : SB21B.7226

Amount of Each Disbursement this Period

[] 65.47

Memo Item

City Towson State MD Zip Code 21286

Purpose of Disbursement
media production-not disseminated

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2016			

Mailing Address 600 Fairmount Avenue, #306

FEC Identification Number

C []

Transaction ID : SB21B.7322

Amount of Each Disbursement this Period

[] -2175.14

Memo Item

City Towson State MD Zip Code 21286

Purpose of Disbursement
media placement-See Line 24

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Mentzer Media Services, Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2016			

Mailing Address 600 Fairmount Avenue, #306

FEC Identification Number

C []

Transaction ID : SB21B.7283

Amount of Each Disbursement this Period

[] 8019.00

Memo Item

City Towson State MD Zip Code 21286

Purpose of Disbursement
media placement-not disseminated

[]

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

[] 5909.33

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)
ESAFund

Full Name (Last, First, Middle Initial)

A. Wiley Rein, LLP

Mailing Address P. O. Box 743878

City
Atlanta

State
GA

Zip Code
30374

Purpose of Disbursement
legal fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2016			

FEC Identification Number

C

Transaction ID : SB21B.7077

Amount of Each Disbursement this Period

18272.50

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

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)..... ▶

									18272.50
									67049.55

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)
ESAFund

Full Name (Last, First, Middle Initial)

A. Kentuckians for Strong Leadership

Mailing Address P. O. Box 7895

City
Louisville

State
KY

Zip Code
40257

Purpose of Disbursement
contribution

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2016			

FEC Identification Number

C C00543256

Transaction ID : SB23.7107

Amount of Each Disbursement this Period

25000.00

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

M	M	/	D	D	/	Y	Y	Y	Y

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

M	M	/	D	D	/	Y	Y	Y	Y

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).....▶

25000.00

25000.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 25 / 2016</div>						
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1429303.80</div> Transaction ID : SE.7098 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 24 / 2016</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1429303.80</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item BDPC, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 07 / 2016</div>						
Mailing Address 2045 Lakeshore Drive Suite 207	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">10871.25</div> Transaction ID : SE.7232 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2016</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>New Orleans</td> <td>LA</td> <td>70122</td> </tr> </table>		City	State	Zip Code	New Orleans	LA	70122
City		State	Zip Code				
New Orleans	LA	70122					
Purpose of Expenditure telephone calls							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Kennedy, John Neely, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>LA</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2217623.52</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1440175.05</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Watkins, Nancy H., , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y

11 / 28 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Chris Mottola Consulting, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016						
Mailing Address 1382 Lafayette Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19564.64</div> Transaction ID : SE.7110 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Cape May</td> <td>NJ</td> <td>08204</td> </tr> </table>		City	State	Zip Code	Cape May	NJ	08204
City		State	Zip Code				
Cape May	NJ	08204					
Purpose of Expenditure media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Masto, Catherine Cortez, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought 759564.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Crossroads Media, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016						
Mailing Address 66 Canal Center Plaza Suite 555	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">143360.00</div> Transaction ID : SE.7070 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Ayotte, Kelly A., , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> State: <u>NH</u>						
Calendar Year-To-Date Per Election for Office Sought 1218547.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">162924.64</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Watkins, Nancy H., , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y 11 / 28 / 2016

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Crossroads Media, LLC	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>
Mailing Address 66 Canal Center Plaza Suite 555	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">228026.00</div> Transaction ID : SE.7157 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>
City Alexandria State VA Zip Code 22314	
Purpose of Expenditure media placement Category/Type 	
Name of Federal Candidate: Ayotte, Kelly A., , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 1640373.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item DDC Advocacy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>
Mailing Address 805 15th Street, N.W. Suite 300	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">150000.00</div> Transaction ID : SE.7169 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 02 / 2016</div>
City Washington State DC Zip Code 20005	
Purpose of Expenditure online advertising Category/Type 	
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NV</u>
Calendar Year-To-Date Per Election for Office Sought 2409564.64	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">378026.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
DDC Advocacy
Mailing Address
805 15th Street, N.W.
Suite 300
City
Washington
State
DC
Zip Code
20005
Purpose of Expenditure
telephone calls
Category/Type
Date of Public Distribution/Dissemination
11 / 07 / 2016
Amount
119575.68
Transaction ID : SE.7235
Date of Disbursement or Obligation
11 / 07 / 2016

Name of Federal Candidate:
Young, Todd, Christopher,
Support
Oppose
Office Sought:
House
Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
1230616.05
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
Digiscore Capital, LLC
Mailing Address
P. O. Box 11987
City
Atlanta
State
GA
Zip Code
30355
Purpose of Expenditure
online advertising
Category/Type
Date of Public Distribution/Dissemination
10 / 28 / 2016
Amount
100000.00
Transaction ID : SE.7127
Date of Disbursement or Obligation
10 / 28 / 2016

Name of Federal Candidate:
Bayh, Evan,
Support
Oppose
Office Sought:
House
Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
1057160.24
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
219575.68
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H.,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: KyZle.com, LLC
Mailing Address: P. O. Box 1813
City: Warsaw, State: IN, Zip Code: 46581
Purpose of Expenditure: advertising
Category/Type:
Date of Public Distribution/Dissemination: 10/26/2016
Amount: 14511.00
Transaction ID: SE.7091
Date of Disbursement or Obligation: 10/20/2016

Name of Federal Candidate: Young, Todd, Christopher,
Support [checked] Oppose
Office Sought: House [] Senate [checked]
Disbursement For: Primary [] General [checked]
Calendar Year-To-Date Per Election for Office Sought: 14511.00

Full Name of Payee: Loma Media Partners
Mailing Address: 101 W. Broadway Suite 300
City: San Diego, State: CA, Zip Code: 92101
Purpose of Expenditure: media production
Category/Type:
Date of Public Distribution/Dissemination: 10/21/2016
Amount: 3000.00
Transaction ID: SE.7073
Date of Disbursement or Obligation: 10/22/2016

Name of Federal Candidate: Ayotte, Kelly A.,
Support [checked] Oppose
Office Sought: House [] Senate [checked]
Disbursement For: Primary [] General [checked]
Calendar Year-To-Date Per Election for Office Sought: 1221547.00

(a) SUBTOTAL of Itemized Independent Expenditures: 17511.00
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) TOTAL Independent Expenditures:

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature: Watkins, Nancy H.,
[Electronically Filed]
Date: 11/28/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Loma Media Partners
Memo Item

Date of Public Distribution/Dissemination
10 / 28 / 2016

Mailing Address
101 W. Broadway
Suite 300

Amount
14400.00

City State Zip Code
San Diego CA 92101

Transaction ID : SE.7142

Purpose of Expenditure
media production
Category/Type

Date of Disbursement or Obligation
10 / 29 / 2016

Name of Federal Candidate:
Ayotte, Kelly A., ,
Support Oppose

Office Sought:
House Senate
President

Calendar Year-To-Date
Per Election for Office Sought
1412347.00

Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Loma Media Partners
Memo Item

Date of Public Distribution/Dissemination
11 / 01 / 2016

Mailing Address
101 W. Broadway
Suite 300

Amount
6000.00

City State Zip Code
San Diego CA 92101

Transaction ID : SE.7159

Purpose of Expenditure
media production
Category/Type

Date of Disbursement or Obligation
11 / 01 / 2016

Name of Federal Candidate:
Ayotte, Kelly A., ,
Support Oppose

Office Sought:
House Senate
President

Calendar Year-To-Date
Per Election for Office Sought
1646373.00

Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
20400.00

(a) SUBTOTAL of Unitemized Independent Expenditures

(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Loma Media Partners	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>
Mailing Address 101 W. Broadway Suite 300	Amount <div style="border: 1px solid black; padding: 2px;"> 24000.00 </div>
City San Diego State CA Zip Code 92101	Transaction ID : SE.7164 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 </div>
Purpose of Expenditure media production Category/Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Ayotte, Kelly A., , ,
Calendar Year-To-Date Per Election for Office Sought 1736873.00	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>NH</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>
Mailing Address 1850 M Street, N.W., #235	Amount <div style="border: 1px solid black; padding: 2px;"> 17401.44 </div>
City Washington State DC Zip Code 20004	Transaction ID : SE.7084 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 24 / 2016 </div>
Purpose of Expenditure media production Category/Type 	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Fleming, John C., , , Jr.
Calendar Year-To-Date Per Election for Office Sought 1873202.29	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: <u>LA</u> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> 41401.44 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ C C00489856
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1850 M Street, N.W., #235	Amount <input type="text"/>
City Washington State DC Zip Code 20004	Transaction ID : SE.7086
Purpose of Expenditure media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Boustany, Charles W., , Dr., Jr.	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>LA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1890076.27	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1850 M Street, N.W., #235	Amount <input type="text"/>
City Washington State DC Zip Code 20004	Transaction ID : SE.7118
Purpose of Expenditure media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bayh, Evan, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 957160.24	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 50773.22
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ C C00489856
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1850 M Street, N.W., #235	Amount <input type="text"/>
City Washington State DC Zip Code 20004	Transaction ID : SE.7190
Purpose of Expenditure media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bayh, Evan, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: IN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1059649.36	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item McCarthy Hennings Media, Inc.	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1850 M Street, N.W., #235	Amount <input type="text"/>
City Washington State DC Zip Code 20004	Transaction ID : SE.7193
Purpose of Expenditure media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NV
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2431206.03	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 24130.51
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
McCarthy Hennings Media, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20004
Purpose of Expenditure
media production
Category/ Type
Name of Federal Candidate:
Bayh, Evan, ,
Support Oppose
Office Sought:
House Senate
District:
IN State:
IN
Calendar Year-To-Date
Per Election for Office Sought
1111040.37
Disbursement For:
Primary General
2016 Other (specify)

Full Name of Payee
McCarthy Hennings Media, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20004
Purpose of Expenditure
media production
Category/ Type
Name of Federal Candidate:
Kennedy, John Neely, ,
Support Oppose
Office Sought:
House Senate
District:
LA State:
LA
Calendar Year-To-Date
Per Election for Office Sought
449368.93
Disbursement For:
Primary General
2016 Other (specify)
Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 8844.41
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , [Electronically Filed]
Signature Date 11 / 28 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
McCarthy Hennings Media, Inc.
Mailing Address
1850 M Street, N.W., #235
City
Washington State
DC Zip Code
20004
Purpose of Expenditure
media production
Category/ Type
Amount
7387.93
Transaction ID : SE.7286
Date of Disbursement or Obligation
11 / 18 / 2016

Name of Federal Candidate:
Campbell, Foster, Lonnnie, , II
Support
Oppose
Office Sought:
House
Senate
District:
State: LA
Disbursement For:
Primary
General
Other (specify)
Runoff

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Amount
255295.00
Transaction ID : SE.7080
Date of Disbursement or Obligation
10 / 24 / 2016

Name of Federal Candidate:
Fleming, John C., , Jr.
Support
Oppose
Office Sought:
House
Senate
District:
State: LA
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
262682.93
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ➤ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;">213963.00</div> Transaction ID : SE.7082 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Boustany, Charles W., , Dr., Jr.	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>LA</u>						
Calendar Year-To-Date Per Election for Office Sought 1855800.85	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid gray; padding: 2px; display: inline-block;">699100.00</div> Transaction ID : SE.7113 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Masto, Catherine Cortez, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought 699100.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;">913063.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid gray; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Watkins, Nancy H., , , **[Electronically Filed]**

Date M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
10 / 27 / 2016
Amount
595422.00
Transaction ID : SE.7120
Date of Disbursement or Obligation
10 / 25 / 2016

Name of Federal Candidate:
Bayh, Evan, ,
Support Oppose
Office Sought:
House Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
609933.00
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
10 / 29 / 2016
Amount
158472.00
Transaction ID : SE.7123
Date of Disbursement or Obligation
10 / 25 / 2016

Name of Federal Candidate:
Bayh, Evan, ,
Support Oppose
Office Sought:
House Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
768405.00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
753894.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 07 / 2016
Amount
154856.00
Transaction ID : SE.7250
Date of Disbursement or Obligation
10 / 25 / 2016

Name of Federal Candidate:
Bayh, Evan, ,
Support Oppose
Office Sought:
House Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
923261.00
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 07 / 2016
Amount
40900.00
Transaction ID : SE.7255
Date of Disbursement or Obligation
10 / 25 / 2016

Name of Federal Candidate:
Masto, Catherine Cortez, ,
Support Oppose
Office Sought:
House Senate
District:
State: NV
Calendar Year-To-Date
Per Election for Office Sought
740000.00
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
195756.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 600 Fairmount Avenue, #306
City: Towson, State: MD, Zip Code: 21286
Purpose of Expenditure: media placement
Category/Type:
Name of Federal Candidate: Bacon, Donald, . . .
Office Sought: House, District: 02, State: NE
Amount: 445895.00
Transaction ID: SE.7132
Date of Disbursement or Obligation: 10/27/2016
Disbursement For: General 2016

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 600 Fairmount Avenue, #306
City: Towson, State: MD, Zip Code: 21286
Purpose of Expenditure: media placement
Category/Type:
Name of Federal Candidate: Bacon, Donald, . . .
Office Sought: House, District: 02, State: NE
Amount: 56505.00
Transaction ID: SE.7145
Date of Disbursement or Obligation: 10/27/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 502400.00
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) TOTAL Independent Expenditures:

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., . .

[Electronically Filed]

Date

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 1500000.00 </div> Transaction ID : SE.7199 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Heck, Joe, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 2259564.64 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 9644.00 </div> Transaction ID : SE.7177 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Fleming, John C., , , Jr.	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>LA</u>						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 1899720.27 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 1509644.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/Type
Date of Public Distribution/Dissemination
11 / 01 / 2016
Amount
185350.00
Transaction ID : SE.7179
Date of Disbursement or Obligation
11 / 01 / 2016

Name of Federal Candidate:
Boustany, Charles W., , Dr., Jr.
Support Oppose
Office Sought:
House Senate
District:
State: LA
Calendar Year-To-Date
Per Election for Office Sought
2085070.27
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/Type
Date of Public Distribution/Dissemination
11 / 01 / 2016
Amount
54000.00
Transaction ID : SE.7181
Date of Disbursement or Obligation
11 / 01 / 2016

Name of Federal Candidate:
Boustany, Charles W., , Dr., Jr.
Support Oppose
Office Sought:
House Senate
District:
State: LA
Calendar Year-To-Date
Per Election for Office Sought
2139070.27
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
239350.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 01 / 2016
Amount
8100.00
Transaction ID : SE.7183
Date of Disbursement or Obligation
11 / 01 / 2016

Name of Federal Candidate:
Boustany, Charles W., , Dr., Jr.
Support Oppose
Office Sought:
House Senate
District:
State: LA
Calendar Year-To-Date
Per Election for Office Sought
2147170.27
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 01 / 2016
Amount
172.00
Transaction ID : SE.7186
Date of Disbursement or Obligation
11 / 01 / 2016

Name of Federal Candidate:
Boustany, Charles W., , Dr., Jr.
Support Oppose
Office Sought:
House Senate
District:
State: LA
Calendar Year-To-Date
Per Election for Office Sought
2147342.27
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
8272.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00489856 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 03 / 2016</div>						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">268980.00</div> Transaction ID : SE.7196 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 02 / 2016</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: Heck, Joe, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NV</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought 2700186.03	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 04 / 2016</div>						
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">49910.00</div> Transaction ID : SE.7213 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 03 / 2016</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Towson</td> <td>MD</td> <td>21286</td> </tr> </table>		City	State	Zip Code	Towson	MD	21286
City		State	Zip Code				
Towson	MD	21286					
Purpose of Expenditure media placement							
Name of Federal Candidate: Fleming, John C., , , Jr. <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>LA</u> <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought 2197252.27	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">318890.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media production
Category/Type
Date of Public Distribution/Dissemination
11 / 05 / 2016
Amount
49934.53
Transaction ID : SE.7227
Date of Disbursement or Obligation
11 / 04 / 2016

Name of Federal Candidate:
Bayh, Evan, ,
Support Oppose
Office Sought:
House Senate
District:
State: IN
Calendar Year-To-Date
Per Election for Office Sought
1109583.89
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/Type
Date of Public Distribution/Dissemination
11 / 05 / 2016
Amount
9500.00
Transaction ID : SE.7206
Date of Disbursement or Obligation
11 / 05 / 2016

Name of Federal Candidate:
Fleming, John C., , Jr.
Support Oppose
Office Sought:
House Senate
District:
State: LA
Calendar Year-To-Date
Per Election for Office Sought
2206752.27
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
59434.53
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee Memo Item
Mentzer Media Services, Inc.
Mailing Address 600 Fairmount Avenue, #306
City Towson State MD Zip Code 21286
Purpose of Expenditure media placement Category/Type
Date of Public Distribution/Dissemination 11/07/2016
Amount 2175.14
Transaction ID : SE.7323
Date of Disbursement or Obligation 11/07/2016

Name of Federal Candidate: Kennedy, John Neely, ,
Support Oppose
Office Sought: House District:
President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 2219798.66
Disbursement For: Primary General 2016 Other (specify)

Full Name of Payee Memo Item
Mentzer Media Services, Inc.
Mailing Address 600 Fairmount Avenue, #306
City Towson State MD Zip Code 21286
Purpose of Expenditure media placement Category/Type
Date of Public Distribution/Dissemination 11/17/2016
Amount 150000.00
Transaction ID : SE.7274
Date of Disbursement or Obligation 11/10/2016

Name of Federal Candidate: Kennedy, John Neely, ,
Support Oppose
Office Sought: House District:
President Senate State: LA
Calendar Year-To-Date Per Election for Office Sought 150000.00
Disbursement For: Primary General 2016 Other (specify) Runoff

(a) SUBTOTAL of Itemized Independent Expenditures 152175.14
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11/28/2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
ESAFund
FEC IDENTIFICATION NUMBER
C C00489856

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 17 / 2016
Amount
150000.00
Transaction ID : SE.7275
Date of Disbursement or Obligation
11 / 10 / 2016

Name of Federal Candidate:
Campbell, Foster, Lonnnie, , II
Support Oppose
Office Sought:
House Senate State: LA
Disbursement For:
Primary General Runoff
Other (specify)

Full Name of Payee
Mentzer Media Services, Inc.
Mailing Address
600 Fairmount Avenue, #306
City
Towson State
MD Zip Code
21286
Purpose of Expenditure
media placement
Category/ Type
Date of Public Distribution/Dissemination
11 / 17 / 2016
Amount
70990.50
Transaction ID : SE.7279
Date of Disbursement or Obligation
11 / 16 / 2016

Name of Federal Candidate:
Kennedy, John Neely, , ,
Support Oppose
Office Sought:
House Senate State: LA
Disbursement For:
Primary General Runoff
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
220990.50
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
---	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Mentzer Media Services, Inc.	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 600 Fairmount Avenue, #306	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 70990.50 </div>
City Towson State MD Zip Code 21286	Transaction ID : SE.7280 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure media placement Category/Type 	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Campbell, Foster, Lonnnie, , II
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 441981.00 </div>	Office Sought: <input type="checkbox"/> House District: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: LA
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ 	Runoff

Full Name of Payee <input type="checkbox"/> Memo Item RedPrint Strategy	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address P. O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 12700.00 </div>
City Herndon State VA Zip Code 20171	Transaction ID : SE.7100 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure media production Category/Type 	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1442003.80 </div>	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ 	Runoff

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 83690.50 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Watkins, Nancy H., , ,

 [Electronically Filed]

 Date
M M / D D / Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item SpotXchange	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 04 / 2016</div>						
Mailing Address 11030 Circlepoint Road	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">52500.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Westminster</td> <td style="padding: 2px;">CO</td> <td style="padding: 2px;">80020</td> </tr> </table>		City	State	Zip Code	Westminster	CO	80020
City		State	Zip Code				
Westminster	CO	80020					
Purpose of Expenditure online advertising	Category/Type 						
Name of Federal Candidate: Ayotte, Kelly A., , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1859373.00</div>						
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							

Full Name of Payee <input type="checkbox"/> Memo Item SpotXchange	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 04 / 2016</div>						
Mailing Address 11030 Circlepoint Road	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">25000.00</div>						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:33%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Westminster</td> <td style="padding: 2px;">CO</td> <td style="padding: 2px;">80020</td> </tr> </table>		City	State	Zip Code	Westminster	CO	80020
City		State	Zip Code				
Westminster	CO	80020					
Purpose of Expenditure online advertising	Category/Type 						
Name of Federal Candidate: Ayotte, Kelly A., , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose						
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ State: <u>NH</u>							
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1884373.00</div>						
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____							

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">77500.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
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Check if 24-hour report 48-hour report ➤ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item SpotXchange	Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 04 / 2016						
Mailing Address 11030 Circlepoint Road	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div> Transaction ID : SE.7223 Date of Disbursement or Obligation MM / DD / YYYY 11 / 03 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:34%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Westminster</td> <td style="padding: 2px;">CO</td> <td style="padding: 2px;">80020</td> </tr> </table>		City	State	Zip Code	Westminster	CO	80020
City		State	Zip Code				
Westminster	CO	80020					
Purpose of Expenditure online advertising							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hassan, Margaret Wood, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>						
Calendar Year-To-Date Per Election for Office Sought 1909373.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016						
Mailing Address 1033 N. Fairfax Street Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">73954.00</div> Transaction ID : SE.7102 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:33%; padding: 2px;">State</td> <td style="width:34%; padding: 2px;">Zip Code</td> </tr> <tr> <td style="padding: 2px;">Alexandria</td> <td style="padding: 2px;">VA</td> <td style="padding: 2px;">22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure online advertising							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NV</u>						
Calendar Year-To-Date Per Election for Office Sought 1515957.80	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">98954.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., , ,

[Electronically Filed]

Date

MM / DD / YYYY
11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1033 N. Fairfax Street Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 176400.00 </div>
City Alexandria State VA Zip Code 22314	Transaction ID : SE.7139 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure online advertising Category/Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Ayotte, Kelly A., , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NH</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1397947.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1033 N. Fairfax Street Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 66500.00 </div>
City Alexandria State VA Zip Code 22314	Transaction ID : SE.7162 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>
Purpose of Expenditure online advertising Category/Type 	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Ayotte, Kelly A., , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>NH</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1712873.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 242900.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Watkins, Nancy H., , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00489856 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 02 / 2016 </div>
Mailing Address 1033 N. Fairfax Street Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 70000.00 </div> Transaction ID : SE.7171 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 11 / 01 / 2016 </div>
City Alexandria State VA Zip Code 22314	
Purpose of Expenditure online advertising Category/Type 	
Name of Federal Candidate: Ayotte, Kelly A., , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: NH <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1806873.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item The Herald Group, LLC	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 29 / 2016 </div>
Mailing Address 1120 G Street, N.W., #600	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 46723.00 </div> Transaction ID : SE.7135 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 29 / 2016 </div>
City Washington State DC Zip Code 20005	
Purpose of Expenditure media production Category/Type 	
Name of Federal Candidate: Bacon, Donald, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: NE <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 549123.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 116723.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
11 / 28 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) ESAFund	FEC IDENTIFICATION NUMBER ▼ C C00489856
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Herald Group, LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1120 G Street, N.W., #600	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : SE.7148
Purpose of Expenditure media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bacon, Donald, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 552111.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Herald Group, LLC	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1120 G Street, N.W., #600	Amount <input type="text"/>
City Washington State DC Zip Code 20005	Transaction ID : SE.7154
Purpose of Expenditure online advertising Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bacon, Donald, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NE
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 636877.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 87754.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/> 8207835.55

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Watkins, Nancy H., ,

[Electronically Filed]

Date

/ /

Signature