

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.

CONTINUING AMERICAS STRENGTH & SECURITY

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
 - May 20 (M5)
 - Aug 20 (M8)
 - Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3)
 - Jun 20 (M6)
 - Sep 20 (M9)
 - Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4)
 - Jul 20 (M7)
 - Oct 20 (M10)
 - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G)
 - Runoff (30R)
 - Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

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

Type or Print Name of Treasurer RALPH STEPHENS

Signature of Treasurer RALPH STEPHENS [Electronically Filed] Date / /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

CONTINUING AMERICAS STRENGTH & SECURITY

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>	<input type="text" value=""/>	<input type="text" value="108935.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="41475.86"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="36500.00"/>	<input type="text" value="107087.30"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="77975.86"/>	<input type="text" value="216022.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="42987.34"/>	<input type="text" value="181034.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="34988.52"/>	<input type="text" value="34988.52"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="942.61"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CONTINUING AMERICAS STRENGTH & SECURITY

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13500.00	22000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	13500.00	22000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	23000.00	80000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	36500.00	102000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	87.30
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
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))..... ▶	36500.00	107087.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	36500.00	107087.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	37987.34	156034.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	37987.34	156034.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	25000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	42987.34	181034.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42987.34	181034.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	36500.00	102000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36500.00	102000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	37987.34	156034.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	87.30
38. Net Operating Expenditures (subtract Line 37 from Line 36)	37987.34	155946.75

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CONTINUING AMERICAS STRENGTH & SECURITY

A. HUGH F. CAFFERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 129 Valentine Drive
 City Lockport State LA Zip Code 70374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Valentine Chemicals, LLC Occupation General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 06 / 2016
Transaction ID : SA11AI.5390
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. STEPHEN B CLARK
 Full Name (Last, First, Middle Initial)
 Mailing Address 9273 LERWICK DR
 City DUBLIN State OH Zip Code 43017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CGCN GROUP Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 19 / 2016
Transaction ID : SA11AI.5372
 Amount of Each Receipt this Period 500.00
 Memo Item

C. JAY FAISON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1355 GREENWOOD CLFS STE. 301
 City CHARLOTTE State NC Zip Code 28204-2981
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CLEARPATH FOUNDATION Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 26 / 2016
Transaction ID : SA11AI.5399
 Amount of Each Receipt this Period 3000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
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: PAGE 7 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)
A. ALTA V FRANKS

Mailing Address PO BOX 7625

City State Zip Code
SHREVEPORT LA 71137

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

Name of Employer Occupation
FRANKS MANAGEMENT COMPANY MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : SA11AI.5368

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. ALFRED S. LIPPMAN

Mailing Address 108 ROSWELL CROSSING

City State Zip Code
LAFAYETTE LA 70508

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

Name of Employer Occupation
LIPPMAN & MAHFOUZ, LLC ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016
Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ALFRED S. LIPPMAN

Mailing Address 108 ROSWELL CROSSING

City State Zip Code
LAFAYETTE LA 70508

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

Name of Employer Occupation
LIPPMAN & MAHFOUZ, LLC ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016
Transaction ID : SA11AI.5394

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	13500.00

**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 8 OF 19
<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)
CONTINUING AMERICAS STRENGTH & SECURITY

A. ABBVIE POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 N. WAUKEGAN ROAD
 City NORTH CHICAGO State IL Zip Code 60064
 FEC ID number of contributing federal political committee. **C** C00536573
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : SA11C.5366
 Amount of Each Receipt this Period
 1500.00
 Memo Item

B. ALLERGAN, INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 INTERPACE PARKWAY
 City PARSIPPANY State NJ Zip Code 07054
 FEC ID number of contributing federal political committee. **C** C00391086
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 19 / 2016
Transaction ID : SA11C.5435
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. AMERICAN MEDICAL ASSOCIATION
 Full Name (Last, First, Middle Initial)
 Mailing Address 25 MASS AVENUE NW SUITE 600
 City WASHINGTON State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C30001309
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2016
Transaction ID : SA11C.5367
 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 9 OF 19
<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)
CONTINUING AMERICAS STRENGTH & SECURITY

A. MERCK & CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 601 PENNSYLVANIA AVE., NW
NORTH BUILDING, SUITE 1200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00097485

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 06 / 2016

Transaction ID : SA11C.5369

Amount of Each Receipt this Period
1000.00

Memo Item

B. NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 2995

City CORDOVA State TN Zip Code 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2016

Transaction ID : SA11C.5377

Amount of Each Receipt this Period
1000.00

Memo Item

C. NEW CUBA PAC

Full Name (Last, First, Middle Initial)
Mailing Address 700 13TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00572628

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 19 / 2016

Transaction ID : SA11C.5373

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 19
<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)
CONTINUING AMERICAS STRENGTH & SECURITY

A. PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 700 NEWPORT CENTER DRIVE
 City NEWPORT BEACH State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C** C00068528
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016
Transaction ID : SA11C.5397
 Amount of Each Receipt this Period
 2000.00
 Memo Item
DEPOSITED IN SEPERATE SEGREGATED FUND

B. UNUM GROUP POLITICAL ACTION COMMITTEE (UNUMPAC)
 Full Name (Last, First, Middle Initial)
 Mailing Address 1 FOUNTAIN SQUARE
 City CHATTANOOGA State TN Zip Code 37402
 FEC ID number of contributing federal political committee. **C** C00177436
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 26 / 2016
Transaction ID : SA11C.5395
 Amount of Each Receipt this Period
 2500.00
 Memo Item

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 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).....▶	4500.00
TOTAL This Period (last page this line number only).....▶	23000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. ACQUA AL 2

Mailing Address 212 7TH ST. SE

City WASHINGTON State DC Zip Code 20003-4311

Purpose of Disbursement
AMEX 05/31 PMT: FOOD & BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 10 / 2016

Transaction ID : SB21B.5423

Amount of Each Disbursement this Period

2068.95

Memo Item

Full Name (Last, First, Middle Initial)

B. ALEXANDRIA YELLOW CAB

Mailing Address 3180 18TH STREET #100

City SAN FRANCISCO State CA Zip Code 94110-2043

Purpose of Disbursement
AMEX 05/03 PMT: TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 08 / 2016

Transaction ID : SB21B.5405

Amount of Each Disbursement this Period

21.19

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES E TKT

Mailing Address 7645 E 63RD ST SUITE 600

City TULSA State OK Zip Code 74133

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 17 / 2016

Transaction ID : SB21B.5415

Amount of Each Disbursement this Period

170.10

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement
CREDIT CARD PAYMENT

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2016

Transaction ID : SB21B.5402

Amount of Each Disbursement this Period

498.70

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement
CREDIT CARD PAYMENT

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.5403

Amount of Each Disbursement this Period

1103.46

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 650448

City DALLAS State TX Zip Code 75265

Purpose of Disbursement
CREDIT CARD PAYMENT

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2016

Transaction ID : SB21B.5422

Amount of Each Disbursement this Period

2089.90

Memo Item

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

3692.06

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. ANEDOT, LLC

Mailing Address 10156 PERKINS ROAD
SUITE 217F

City State Zip Code
BATON ROUGE LA 70810

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.5386**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CALIFORNIA PIZZA KITCHEN

Mailing Address 5501 JOSH BIRMMINGHAM HWY

City State Zip Code
CHARLOTTE NC 28208

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.5417**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City State Zip Code
ATLANTA GA 30354

Purpose of Disbursement
AMEX 05/03 PMT: TRAVEL

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.5408**

Amount of Each Disbursement this Period

Memo Item

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

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 15 / 2016

Transaction ID : SB21B.5421

Amount of Each Disbursement this Period

695.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DIAL CAB COMPANY

Mailing Address 2838 BLAENBURG ROAD NE

City WASHINGTON State DC Zip Code 20018

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 12 / 2016

Transaction ID : SB21B.5429

Amount of Each Disbursement this Period

20.95

Memo Item

Full Name (Last, First, Middle Initial)

C. HILTON ATLANTA AIRPORT

Mailing Address 1031 VIRGINIA AVENUE

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2016

Transaction ID : SB21B.5431

Amount of Each Disbursement this Period

248.92

Memo Item

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

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

248.92

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. HILTON HOTELS

Mailing Address 1919 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
FACILITY RENTAL & CATERING

007
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5430

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NEW SOUTH PARKING

Mailing Address 800 AIRLINE DR

City KENNER State LA Zip Code 70062

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

002
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5419

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. OCTAGON, INC.

Mailing Address 800 CONNECTICUT AVE.
2ND FLOOR

City NORWALK State CT Zip Code 06854

Purpose of Disbursement
EVENT TICKETS

007
Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5384

Amount of Each Disbursement this Period

Memo Item

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

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. POSTLETHWAITE & NETTERVILLE APAC

Mailing Address 8550 UNITED PLAZA BLVD
SUITE 1001

City State Zip Code
BATON ROUGE LA 70809

Purpose of Disbursement
CAMPAIGN ACCOUNTING & CONSULTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5380

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. SALAMANDER RESORT & SPA

Mailing Address 500 N. PENDLETON ST.

City State Zip Code
MIDDLEBURG VA 20117

Purpose of Disbursement
AMEX 05/03 PMT: TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5407

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. SALAMANDER RESORT & SPA

Mailing Address 500 N. PENDLETON ST.

City State Zip Code
MIDDLEBURG VA 20117

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.5411

Amount of Each Disbursement this Period

Memo Item

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

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. VTS WASHINGTON DC TAXI

Mailing Address 3350 V STREET NE

City WASHINGTON State DC Zip Code 20018

Purpose of Disbursement
AMEX 05/31 PMT: TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : SB21B.5416

Amount of Each Disbursement this Period

12.66

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 Y Y

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 Y Y

Amount of Each Disbursement this Period

Memo Item

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

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

0.00

37972.20

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

Full Name (Last, First, Middle Initial)

A. GRASSLEY COMMITTEE INC

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

Purpose of Disbursement
CONTRIBUTION

Candidate Name
CHUCK GRASSLEY

Office Sought: House
 Senate
 President
State: IA District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

011
Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 19 / 2016

Transaction ID : SB23.5382

Amount of Each Disbursement this Period

5000.00

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 Y Y

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 Y Y

Amount of Each Disbursement this Period

Memo Item

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

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

5000.00

5000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 19
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CONTINUING AMERICAS STRENGTH & SECURITY

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICAN EXPRESS	Nature of Debt (Purpose): MISCELLANEOUS EXPENSE
Mailing Address PO BOX 650448	
City State Zip Code DALLAS TX 75265	

Outstanding Balance Beginning This Period 1602.16	Transaction ID : SD10.5358	
Amount Incurred This Period 0.00	Payment This Period 1602.16	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor AMERICAN EXPRESS	Nature of Debt (Purpose): MISCELLANEOUS EXPENSE
Mailing Address PO BOX 650448	
City State Zip Code DALLAS TX 75265	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5434	
Amount Incurred This Period 942.61	Payment This Period 0.00	Outstanding Balance at Close of This Period 942.61

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	942.61
2) TOTALS This Period (last page this line number only)..... ▶	942.61
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	942.61