

# 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**  
**LONGHORN PAC**

ADDRESS (number and street) **PO Box 30844**  
Check if different than previously reported. (ACC) **Bethesda MD 20824-0844**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00402602** 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  08 /  01 /  2017 through  08 /  31 /  2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Stone, O'Lene, , ,  
Type or Print Name of Treasurer

Signature of Treasurer *Stone, O'Lene, , ,* [Electronically Filed] Date  09 /  20 /  2017

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**LONGHORN PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		<input type="text" value="10914.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="18950.69"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7500.00"/>	<input type="text" value="74000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="26450.69"/>	<input type="text" value="84914.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="13191.48"/>	<input type="text" value="71655.44"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="13259.21"/>	<input type="text" value="13259.21"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**LONGHORN PAC**

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).....	5000.00	8500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	8500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	65500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7500.00	74000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7500.00	74000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7500.00	74000.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	13191.48	55655.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	13191.48	55655.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	16000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	13191.48	71655.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	13191.48	71655.44

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7500.00	74000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7500.00	74000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	13191.48	55655.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	13191.48	55655.44

**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 15  
(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)  
**LONGHORN PAC**

**A. Means, James Greg, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2451 North Taylor Street  
 City Arlington State VA Zip Code 22207-4021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Alpine Group Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 16 / 2017  
**Transaction ID : AF84278D2B05045DB948**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**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  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 7 OF 15
<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)  
**LONGHORN PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Capital One Financial Corporation Associates Political Fund

Mailing Address 1680 Capital One Drive

City McLean	State VA	Zip Code 22102
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		02		2017

**Transaction ID : A2A171DE72F4E4E41938**

Amount of Each Receipt this Period  
2500.00

Memo Item

**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	/	D D	/	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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

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

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial)

**A. Aristotle International, Inc.**

Mailing Address 205 Pennsylvania Avenue SE

City  
Washington

State  
DC

Zip Code  
20003-1164

Purpose of Disbursement  
PAC Software Service

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : BDECCDB94**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Smith, Lamar, , ,**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824-0844

Purpose of Disbursement  
SEE MEMO ITEMS

**001**  
Category/  
Type

Candidate Name

**Smith, Lamar, , ,**

Office Sought:  House  
 Senate  
 President  
State: TX District: 21

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : BFEC5E7B05**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Eatly**

Mailing Address 200 5th Avenue

City  
New York

State  
NY

Zip Code  
10010

Purpose of Disbursement  
PAC Meal Expense

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**C**   
**Transaction ID : B7EC04530F**  
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"/> 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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address PO Box 619616			FEC Identification Number C [REDACTED]	
City Dfw Airport	State TX	Zip Code 75261-9616	Transaction ID : <b>B6F754CFBE</b>	
Purpose of Disbursement PAC Airfare		Category/ Type 002	Amount of Each Disbursement this Period 176.20	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. United States Tennis Association</b>			Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address 70 West Red Oak Lane			FEC Identification Number C [REDACTED]	
City White Plains	State NY	Zip Code 10604	Transaction ID : <b>BC340B536E'</b>	
Purpose of Disbursement PAC Bag Check		Category/ Type 001	Amount of Each Disbursement this Period 10.00	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. United States Tennis Association</b>			Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address 70 West Red Oak Lane			FEC Identification Number C [REDACTED]	
City White Plains	State NY	Zip Code 10604	Transaction ID : <b>BD77D136E/</b>	
Purpose of Disbursement PAC Gifts and Mementos		Category/ Type 006	Amount of Each Disbursement this Period 682.55	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**LONGHORN PAC**

**A. Campaign Financial Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 30844

City: Bethesda, State: MD, Zip Code: 20824-0844

Purpose of Disbursement: SEE MEMO ITEMS  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 10 / 2017

FEC Identification Number: C  
Transaction ID : BA845C8934  
Amount of Each Disbursement this Period: 550.00

Memo Item

**B. Campaign Financial Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 30844

City: Bethesda, State: MD, Zip Code: 20824-0844

Purpose of Disbursement: PAC General Office Supplies  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 10 / 2017

FEC Identification Number: C  
Transaction ID : BFEBFE3029  
Amount of Each Disbursement this Period: 50.00

Memo Item

**C. Campaign Financial Services**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 30844

City: Bethesda, State: MD, Zip Code: 20824-0844

Purpose of Disbursement: PAC Compliance Consulting  
Candidate Name: \_\_\_\_\_

Office Sought:  House  Senate  President  
State: \_\_\_\_\_ District: \_\_\_\_\_

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 10 / 2017

FEC Identification Number: C  
Transaction ID : BBDE35B04  
Amount of Each Disbursement this Period: 500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 550.00

**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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial) <b>A. Vinyard, Ashlee, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address PO Box 30844		FEC Identification Number C [REDACTED] <b>Transaction ID : B922809CF4f</b> Amount of Each Disbursement this Period [REDACTED] 354.71	
City Bethesda	State MD	Zip Code 20824-0844	Category/ Type 002
Purpose of Disbursement SEE MEMO ITEMS			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address PO Box 619616		FEC Identification Number C [REDACTED] <b>Transaction ID : BD84BA07BD</b> Amount of Each Disbursement this Period [REDACTED] 187.40	
City Dfw Airport	State TX	Zip Code 75261-9616	Category/ Type 002
Purpose of Disbursement PAC Airfare			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Eatly</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2017	
Mailing Address 200 5th Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : BB0901DFC:</b> Amount of Each Disbursement this Period [REDACTED] 7.40	
City New York	State NY	Zip Code 10010	Category/ Type 001
Purpose of Disbursement PAC Meal Expense			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 354.71
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2017	
Mailing Address PO Box 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : B800422F656</b> Amount of Each Disbursement this Period 9003.80	
City Newark	State NJ	Zip Code 07101-1270	Category/ Type 001
Purpose of Disbursement SEE MEMO ITEMS		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Ticketmaster</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2017	
Mailing Address 9348 Civic Center Drive		FEC Identification Number C [REDACTED] <b>Transaction ID : B84F9750BB1</b> Amount of Each Disbursement this Period 1044.00	
City Beverly Hills	State CA	Zip Code 90210-3624	Category/ Type 003
Purpose of Disbursement PAC Facility Rental		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Eatly</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2017	
Mailing Address 200 5th Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : BBFA4B601</b> Amount of Each Disbursement this Period 1151.00	
City New York	State NY	Zip Code 10010	Category/ Type 003
Purpose of Disbursement PAC Catering		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9003.80
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial)

**A. United States Tennis Association**

Mailing Address 70 West Red Oak Lane

City White Plains State NY Zip Code 10604

Purpose of Disbursement  
PAC Facility Rental

001  
 002  
 003  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 21 / 2017

FEC Identification Number  
C  
Transaction ID : B8B082C117  
Amount of Each Disbursement this Period  
6520.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address PO Box 619616

City Dfw Airport State TX Zip Code 75261-9616

Purpose of Disbursement  
PAC Airfare

001  
 002  
Category/  
Type

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

Date of Disbursement  
MM / DD / YYYY  
08 / 21 / 2017

FEC Identification Number  
C  
Transaction ID : B1FCF9B100  
Amount of Each Disbursement this Period  
288.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. Ethos Advisors, LLC**

Mailing Address PO Box 901202

City Kansas City State MO Zip Code 64190-1202

Purpose of Disbursement  
SEE MEMO ITEMS

001  
 002  
 003  
Category/  
Type

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

Date of Disbursement  
MM / DD / YYYY  
08 / 31 / 2017

FEC Identification Number  
C  
Transaction ID : B18CA093CF  
Amount of Each Disbursement this Period  
2187.15

Memo Item

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

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

2187.15

**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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial) <b>A. Ethos Advisors, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017	
Mailing Address PO Box 901202		FEC Identification Number C [REDACTED] <b>Transaction ID : BC6921281C</b> Amount of Each Disbursement this Period [REDACTED] 800.00	
City Kansas City	State MO	Zip Code 64190-1202	Category/ Type 003
Purpose of Disbursement PAC Fundraising Consulting		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. NYC Taxi</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017	
Mailing Address 33 Beaver St		FEC Identification Number C [REDACTED] <b>Transaction ID : B3850A169Af</b> Amount of Each Disbursement this Period [REDACTED] 149.11	
City New York	State NY	Zip Code 10004-2736	Category/ Type 002
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Eatly</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017	
Mailing Address 200 5th Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : BFD2836CEe</b> Amount of Each Disbursement this Period [REDACTED] 14.81	
City New York	State NY	Zip Code 10010	Category/ Type 001
Purpose of Disbursement PAC Meal Expense		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

[REDACTED] 0.00

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

[REDACTED]

**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)  
**LONGHORN PAC**

Full Name (Last, First, Middle Initial)

**A. United States Tennis Association**

Mailing Address 70 West Red Oak Lane

City White Plains State NY Zip Code 10604

Purpose of Disbursement  
PAC Gifts and Mementos

**006**  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2017

FEC Identification Number

**C**  
**Transaction ID : B06364DBDD**  
Amount of Each Disbursement this Period  
408.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. Fugazy Event Management**

Mailing Address 1270 Avenue of the Americas

City New York State NY Zip Code 10020-1700

Purpose of Disbursement  
PAC Transportation

**002**  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2017

FEC Identification Number

**C**  
**Transaction ID : B88E9EDDD7**  
Amount of Each Disbursement this Period  
203.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Union Fare**

Mailing Address 5 E 17th St

City New York State NY Zip Code 10003-1949

Purpose of Disbursement  
PAC Meal Expense

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 31 / 2017

FEC Identification Number

**C**  
**Transaction ID : B232471504f**  
Amount of Each Disbursement this Period  
253.20

Memo Item

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

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

0.00  
13191.48