

**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

Bluegrass Committee

ADDRESS (number and street) 228 S. Washington St., Ste. 115

Check if different than previously reported. (ACC)

Alexandria VA 22314-5404

2. **FEC IDENTIFICATION NUMBER** ▼ C00235655 **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 M M M / D D D / Y Y Y Y Y Y in the State of  

(d) 30-Day **POST**-Election Report for the:

General (30G)  Runoff (30R)  Special (30S)

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

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2016 through 07 / 31 / 2016

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 Larry Steinberg

Signature of Treasurer Larry Steinberg **[Electronically Filed]** Date 08 / 18 / 2016

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Bluegrass Committee**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		477713.12
(b) Cash on Hand at Beginning of Reporting Period.....	375582.74	
(c) Total Receipts (from Line 19) .....	35051.89	369224.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	410634.63	846937.51
7. Total Disbursements (from Line 31).....	36869.35	473172.23
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	373765.28	373765.28
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Bluegrass Committee**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	16000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	16000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35000.00	319500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	35000.00	335500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	33145.45
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.).....	51.89	578.94
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))..... ▶	35051.89	369224.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	35051.89	369224.39

**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 .....	31869.35	216672.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	31869.35	216672.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	166000.00
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	90500.00
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)) ..	36869.35	473172.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36869.35	473172.23

**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) .....	35000.00	335500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	35000.00	335500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	31869.35	216672.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	31869.35	216672.23

**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 12
<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

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)  
**Bluegrass Committee**

**A. PRIVATE EQUITY GROWTH CAPITAL COUNCIL POLITICAL ACTION COMMITTEE (PEGCC-PAC)**

Full Name (Last, First, Middle Initial)  
PRIVATE EQUITY GROWTH CAPITAL COUNCIL POLITICAL ACTION COMMITTEE (PEGCC-PAC)

Mailing Address 950 F STREET NW  
SUITE 550

City Washington State DC Zip Code 20004-1463

FEC ID number of contributing federal political committee. **C** C00495002

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 13 / 2016  
**Transaction ID : A40EA8C1933654144AA8**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. National Automobile Dealers Association PAC**

Full Name (Last, First, Middle Initial)  
National Automobile Dealers Association PAC

Mailing Address Political Action Committee  
8400 Westpark Drive

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
07 / 13 / 2016  
**Transaction ID : A43E0E7D928424880A1E**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. Amer. Society of Anesthesiologists PAC**

Full Name (Last, First, Middle Initial)  
Amer. Society of Anesthesiologists PAC

Mailing Address 520 North Northwest Highway

City Park Ridge State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
07 / 13 / 2016  
**Transaction ID : A15ECE1B8576042FA9D0**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. National Assn of Health Underwriters PAC**

Mailing Address 2000 North 14th Street  
Suite 450

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00283135**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 19 / 2016  
**Transaction ID : A618FDC9CE7214EB6900**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. American College of Cardiology PAC**

Mailing Address 2400 N Street, NW

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C C00375360**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 19 / 2016  
**Transaction ID : AFF02929603BE411688D**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. American Council of Life Insurance PAC**

Mailing Address Political Action Committee  
101 Constitution Avenue, NW

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
07 / 19 / 2016  
**Transaction ID : A3E822AF9DE8643209B9**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 12
<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)  
**Bluegrass Committee**

**A. Eli Lilly and Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 555 12th St NW Ste 650  
 Suite 650  
 City Washington State DC Zip Code 20004-1209  
 FEC ID number of contributing federal political committee. **C** C00082792  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 9000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2016  
**Transaction ID : A6232C7539C894832953**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 Refund issued 8/15/2016

**B. Realtors Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 430 N. Michigan Avenue  
 City Chicago State IL Zip Code 60611  
 FEC ID number of contributing federal political committee. **C** C00030718  
 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  
 07 / 29 / 2016  
**Transaction ID : AAF4AD29A20A4494F8E8**  
 Amount of Each Receipt this Period  
 5000.00  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	35000.00



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

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

FOR LINE NUMBER: PAGE 9 OF 12  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

**A. Congressional Bank**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7963 Tuckerman Ln  
 City Potomac State MD Zip Code 20854-3243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 547.02

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 29 / 2016  
**Transaction ID : A33F1258BE9A84A1D87B**  
 Amount of Each Receipt this Period  
 42.90  
 Memo Item  
 Interest Inc

**B.**  
 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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42.90
<b>TOTAL</b> This Period (last page this line number only).....▶	42.90

**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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Wesley Scott**

Mailing Address 1925 Arboro Pl.

City Louisville State KY Zip Code 40220-3581

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2016

Transaction ID : **B7F4E4C5094F245A5B96**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Madison Run Holdings LLC**

Mailing Address 1156 15th Street NW  
Suite 329

City Washington State DC Zip Code 20005-1714

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

Transaction ID : **B6FD8EBA37DF9473B9CB**

Amount of Each Disbursement this Period

2400.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cavalry LLC**

Mailing Address 425 Massachusetts Ave. NW #1119

City Washington State DC Zip Code 20001-7635

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

Transaction ID : **B7B3674EAEBB149679E5**

Amount of Each Disbursement this Period

15000.00

Memo Item

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

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

18400.00

**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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Aristotle International**

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement Database Software

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 25 / 2016

Transaction ID : B5E405C68D79D4AAC849

Amount of Each Disbursement this Period

600.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Laura Haney**

Mailing Address 616 S Adams St

City Arlington State VA Zip Code 22204-2113

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2016

Transaction ID : B4BDFF3E691E643E4BA3

Amount of Each Disbursement this Period

12676.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. Aliign**

Mailing Address 12800 N Meridian St Ste 400

City Carmel State IN Zip Code 46032-9443

Purpose of Disbursement Accounting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 29 / 2016

Transaction ID : B146A119B23A14C4595C

Amount of Each Disbursement this Period

145.00

Memo Item

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

13421.40

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

31821.40

**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)  
**Bluegrass Committee**

**A. MARCO RUBIO FOR SENATE 2016**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 661537

City MIAMI State FL Zip Code 33266

Purpose of Disbursement  
Political Contribution

Candidate Name  
**Marco Rubio**

Office Sought:  House  Senate  President  
State: FL District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

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

Transaction ID : **B79EBA07D9C1844A7A3D**

Amount of Each Disbursement this Period  
5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

Memo Item

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