

# 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  
Pioneer Political Action Committee

ADDRESS (number and street) 701 8th Street, NW  
Suite 500  
 Check if different than previously reported. (ACC)  
Washington DC 20001

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE  
C C00325357 3. IS THIS REPORT NEW OR AMENDED  
 NEW (N)  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 / 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 / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y  
04 / 01 / 2016 through M M / D D / Y Y Y Y Y Y  
04 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Virginia D. Ragan

Signature of Treasurer Virginia D. Ragan [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
06 / 20 / 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)

Write or Type Committee Name

**Pioneer Political Action 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"/>	<input type="text" value="364604.65"/>	<input type="text" value="364604.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="521879.43"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="73750.0"/>	<input type="text" value="379950.0"/>
(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="595629.43"/>	<input type="text" value="744554.65"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30790.45"/>	<input type="text" value="179715.67"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="564838.98"/>	<input type="text" value="564838.98"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.0"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.0"/>	

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)

Write or Type Committee Name

**Pioneer Political Action 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).....	11750.0	65950.0
(ii) Unitemized .....	0.0	0.0
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11750.0	65950.0
(b) Political Party Committees .....	0.0	0.0
(c) Other Political Committees (such as PACs).....	62000.0	314000.0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	73750.0	379950.0
12. Transfers From Affiliated/Other Party Committees.....	0.0	0.0
13. All Loans Received .....	0.0	0.0
14. Loan Repayments Received.....	0.0	0.0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.0	0.0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.0	0.0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.0	0.0
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))..... ▶	73750.0	379950.0
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	73750.0	379950.0

**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 .....	3534.48	82627.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3534.48	82627.49
22. Transfers to Affiliated/Other Party Committees.....	0.0	0.0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26630.97	96463.18
24. Independent Expenditures (use Schedule E) .....	0.0	0.0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.0	0.0
26. Loan Repayments Made.....	0.0	0.0
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.0	0.0
(b) Political Party Committees .....	0.0	0.0
(c) Other Political Committees (such as PACs).....	0.0	0.0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.0	0.0
29. Other Disbursements .....	625.0	625.0
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)) ..	30790.45	179715.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30790.45	179715.67

**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) .....	73750.0	379950.0
34. Total Contribution Refunds (from Line 28(d)) .....	0.0	0.0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73750.0	379950.0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3534.48	82627.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.0	0.0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3534.48	82627.49

**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 21
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<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)  
**Pioneer Political Action Committee**

**A. Clint Fegan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2640 Allen Glen Dr.  
City Mechanicsburg State PA Zip Code 17055  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vibra Healthcare Occupation CFO  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.0

Date of Receipt 04 / 28 / 2016  
**Transaction ID : 1461846542659**  
Amount of Each Receipt this Period 500.0  
 Memo Item  
Check

**B. Wayne Mackey**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6601 Westwind Way  
City Crestwood State KY Zip Code 40014  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Vibra Healthcare Occupation VP of Talent Acquisition  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.0

Date of Receipt 04 / 28 / 2016  
**Transaction ID : 1461846959375**  
Amount of Each Receipt this Period 500.0  
 Memo Item  
Check

**C. Rocco A. Ortenzio**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7 West Wind Drive  
City Lemoyne State PA Zip Code 17043  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Select Medical Group Occupation Chairman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.0

Date of Receipt 04 / 28 / 2016  
**Transaction ID : 1461845420023**  
Amount of Each Receipt this Period 5000.0  
 Memo Item  
Check

**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: (check only one)	PAGE 7 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Pioneer Political Action Committee**

**A. Robert A. Ortenzio**  
Full Name (Last, First, Middle Initial)

Mailing Address 1709 Olmsted Way East

City State Zip Code  
Camp Hill PA 17011

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

Name of Employer Occupation  
Select Medical Group Executive Chairman & Co Founder

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2016  
**Transaction ID : 1461845582183**

Amount of Each Receipt this Period  
5000.0

Memo Item  
Check

**B. Jay Perron**  
Full Name (Last, First, Middle Initial)

Mailing Address 1441 Constitution Ave NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation  
America's Health Insurance Plans VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.0

Date of Receipt  
MM / DD / YYYY  
04 / 04 / 2016  
**Transaction ID : 1459805465928**

Amount of Each Receipt this Period  
250.0

Memo Item  
Credit Card

**C. Robert J. Sutton**  
Full Name (Last, First, Middle Initial)

Mailing Address 1055 Country Club RD

City State Zip Code  
Camp Hill PA 17011

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

Name of Employer Occupation  
Vibra Healthcare Executive VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.0

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2016  
**Transaction ID : 1461845861803**

Amount of Each Receipt this Period  
500.0

Memo Item  
Check

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11750.00

**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 21
<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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Abbvie PAC**

Mailing Address Dept. 0312 Bldg. AP6D-2  
1 N. Waukegan Road

City N. 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 ▼  
5000.0

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 28 / 2016  
**Transaction ID : 1461845949861**

Amount of Each Receipt this Period  
5000.0

Memo Item  
 Check

Full Name (Last, First, Middle Initial)  
**B. Anheuser-Busch Companies Inc. PAC**

Mailing Address One Busch Place

City St. Louis State MO Zip Code 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 04 / 2016  
**Transaction ID : 1459794641601**

Amount of Each Receipt this Period  
5000.0

Memo Item  
 Check

Full Name (Last, First, Middle Initial)  
**c. Citigroup Inc. PAC**

Mailing Address 1101 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039305

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
04 / 07 / 2016  
**Transaction ID : 1460056495553**

Amount of Each Receipt this Period  
5000.0

Memo Item  
 Check

<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 9 OF 21
<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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Council of Insurance Agents & Brokers PAC**

Mailing Address 701 Pennsylvania Avenue NW  
No. 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00039578**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.0

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2016  
**Transaction ID : 1460056304937**

Amount of Each Receipt this Period  
1000.0

Memo Item  
 Check

Full Name (Last, First, Middle Initial)  
**B. Exelon Corp. PAC**

Mailing Address 101 Constitution Ave. NW  
Suite 400 East

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2016  
**Transaction ID : 1460056434939**

Amount of Each Receipt this Period  
5000.0

Memo Item  
 Check

Full Name (Last, First, Middle Initial)  
**C. Farmers Insurance Group PAC**

Mailing Address 2350 Kerner Boulevard  
Suite 250

City San Rafael State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C C00135681**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.0

Date of Receipt  
MM / DD / YYYY  
04 / 07 / 2016  
**Transaction ID : 1460056070574**

Amount of Each Receipt this Period  
5000.0

Memo Item  
 Check

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	11000.00
<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 10 OF 21
<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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. Federal Express PAC</b>		Date of Receipt MM / DD / YYYY 04 / 04 / 2016 <b>Transaction ID : 1459794581138</b>
Mailing Address 942 S. Shady Grove Road		Amount of Each Receipt this Period 5000.0
City Memphis	State TN	Zip Code 38120
FEC ID number of contributing federal political committee. C C00068692	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	
		<input type="checkbox"/> Memo Item <input type="checkbox"/> Check

Full Name (Last, First, Middle Initial) <b>B. JP Morgan Chase &amp; Co. PAC</b>		Date of Receipt MM / DD / YYYY 04 / 28 / 2016 <b>Transaction ID : 1461868791279</b>
Mailing Address 601 Pennsylvania Ave NW, 7th floor		Amount of Each Receipt this Period 5000.0
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00104299	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	
		<input type="checkbox"/> Memo Item <input type="checkbox"/> Check

Full Name (Last, First, Middle Initial) <b>C. National Fisheries Association</b>		Date of Receipt MM / DD / YYYY 04 / 04 / 2016 <b>Transaction ID : 1459794700566</b>
Mailing Address 7918 Jones Branch Drive Suite 700		Amount of Each Receipt this Period 5000.0
City McLean	State VA	Zip Code 22102
FEC ID number of contributing federal political committee. C C00101204	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.0	
		<input type="checkbox"/> Memo Item <input type="checkbox"/> Check

<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 11 OF 21
<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)  
**Pioneer Political Action Committee**

**A. National Multi Housing Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 M Street NW  
 Suite 540  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00130773  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.0

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 04 / 2016  
**Transaction ID : 1459794489696**  
 Amount of Each Receipt this Period  
 5000.0  
 Memo Item  
 Check

**B. Political Action Committee of the AAOS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 Massachusetts Avenue NE  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00343137  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.0

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : 1460056613982**  
 Amount of Each Receipt this Period  
 5000.0  
 Memo Item  
 Check

**C. Retail PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 325-7th Street NW Suite 1100  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00040329  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.0

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 07 / 2016  
**Transaction ID : 1460056136214**  
 Amount of Each Receipt this Period  
 5000.0  
 Memo Item  
 Check

<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 12 OF 21
<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)  
**Pioneer Political Action Committee**

**A. TTX Company Employees PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 101 N. Wacker Drive  
City Chicago State IL Zip Code 60606  
FEC ID number of contributing federal political committee. **C** C00138974  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.0

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 07 / 2016  
**Transaction ID : 146005655740**  
Amount of Each Receipt this Period  
3000.0  
 Memo Item  
Check

**B. United Transportation Union Political Education League**  
Full Name (Last, First, Middle Initial)  
Mailing Address 14600 Detroit Avenue  
City Cleveland State OH Zip Code 44107  
FEC ID number of contributing federal political committee. **C** C00001636  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 3000.0

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 07 / 2016  
**Transaction ID : 1460056248745**  
Amount of Each Receipt this Period  
3000.0  
 Memo Item  
Check

**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).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	62000.00

**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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Bogart Associates**

Mailing Address 217 Third St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC expense reimbursement - see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 1459796649372**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Taxi/Metro Expenses**

Mailing Address n/a

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC taxi/metro

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 1459796930246**

Amount of Each Disbursement this Period

Memo Item

See check to Bogart Associates on 4/4/16 for \$100.13

Full Name (Last, First, Middle Initial)

**C. Bogart Associates**

Mailing Address 217 Third St, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAC Expense Reimbursement see below

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 1461596284221**

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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
PAC Baggage Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461600504053**

Amount of Each Disbursement this Period

Memo Item  
See check to Bogart Associates 04/21/16 for \$437.36

Full Name (Last, First, Middle Initial)

**B. Taxi/Metro Expenses**

Mailing Address n/a

City Washington State DC Zip Code 20004

Purpose of Disbursement  
PAC Taxi/Metro Expenses

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461599696008**

Amount of Each Disbursement this Period

Memo Item  
See check to Bogart Associates 04/21/16 for \$437.36

Full Name (Last, First, Middle Initial)

**C. The Phoenician Resort**

Mailing Address 6000 E. Camelback road

City Scottsdale State AZ Zip Code 85251

Purpose of Disbursement  
PAC Hotel Expense

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461599584496**

Amount of Each Disbursement this Period

Memo Item  
See check to Bogart Associates 04/21/16 for \$437.36

**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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Elavon Inc**

Mailing Address Two Concourse Parkway  
Suite 800

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
PAC Merchant Fees

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1463013349109**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. First Bankcard**

Mailing Address P.O. Box 2818

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
PAC Credit Card payment - see below

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461754736441**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
PAC Airline Tickets

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461757636147**

Amount of Each Disbursement this Period

Memo Item  
See Check #1905 \$1,159.21 to First Bankcard

**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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Budget Rent A Car**

Mailing Address 4600 International Gateway

City Columbus State OH Zip Code 43201

Purpose of Disbursement  
PAC car rental

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1463689252161**

Amount of Each Disbursement this Period

Memo Item  
see payment to First Bankcard on 04/21/2016

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address PO Box 66423

City Chicago State IL Zip Code 60666

Purpose of Disbursement  
Airline Baggage Fees

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461756705443**

Amount of Each Disbursement this Period

Memo Item  
See Check #1905 \$1,159.21 to First Bankcard

Full Name (Last, First, Middle Initial)

**C. First Bankcard**

Mailing Address P.O. Box 2818

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
PAC Credit Card payment - see below

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461764747439**

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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
PAC Airline Tickets

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461764854986**

Amount of Each Disbursement this Period

Memo Item  
See chk #1904 to First Bankcard \$590.70

Full Name (Last, First, Middle Initial)

**B. First Bankcard**

Mailing Address P.O. Box 2818

City Omaha State NE Zip Code 68103

Purpose of Disbursement  
PAC Credit Card payment - see below

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461764940361**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

Mailing Address PO Box 619616

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
PAC Airline Tickets

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 1461765043194**

Amount of Each Disbursement this Period

Memo Item  
See chk #1908 First Bankcard \$360 4/27/16

**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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. United Parcel Service**

Mailing Address 335 Northmeadow Parkway  
Suite 119

City Roswell State GA Zip Code 30076

Purpose of Disbursement  
PAC facility fee

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 1460128996884**

Amount of Each Disbursement this Period

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

/  /

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

/  /

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 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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Alaska & American Airlines, Hyatt, Apex Limo**

Mailing Address PO Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement  
PAC travel & lodging in-kind

011

Category/  
Type

Candidate Name

**David Reichert**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	22	/	2016

**Transaction ID : 1464896236584**

Amount of Each Disbursement this Period

1630.97
---------

Memo Item  
see June report for expense payment

Full Name (Last, First, Middle Initial)

**B. Bill Shuster For Congress**

Mailing Address 207 Allegheny Street

City Hollidaysburg State PA Zip Code 16648

Purpose of Disbursement  
PAC political contribution

011

Category/  
Type

Candidate Name

**Bill Shuster**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	12	/	2016

**Transaction ID : 1460492171747**

Amount of Each Disbursement this Period

5000.0
--------

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of John McCain**

Mailing Address PO Box 10443

City Phoenix State AZ Zip Code 85064

Purpose of Disbursement  
PAC political contribution

011

Category/  
Type

Candidate Name

**John McCain**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AZ District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	12	/	2016

**Transaction ID : 1460491883924**

Amount of Each Disbursement this Period

5000.0
--------

Memo Item

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

11630.97
----------

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

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**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)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Pat Toomey**

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Patrick J. Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Date of Disbursement

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

**Transaction ID : 1460738603880**

Amount of Each Disbursement this Period

5000.0

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Pat Toomey**

Mailing Address 2720 Jordan Road

City Orefield State PA Zip Code 18069

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Patrick J. Toomey**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: PA District: 00

Date of Disbursement

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

**Transaction ID : 1460739412933**

Amount of Each Disbursement this Period

5000.0

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Roy Blunt**

Mailing Address 1736 E. Sunshine St.  
Suite 1011

City Springfield State MO Zip Code 65804

Purpose of Disbursement  
PAC Political Contribution

011

Candidate Name

**Roy Blunt**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District: 07

Date of Disbursement

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

**Transaction ID : 1460737707899**

Amount of Each Disbursement this Period

5000.0

Memo Item

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

15000.00

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

26630.97

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Pioneer Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Cleveland Clinic Children's**

Mailing Address 9500 Euclid Avenue, DVB

City Cleveland State OH Zip Code 44195

Purpose of Disbursement  
PAC Donation

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : 1461971734147**

Amount of Each Disbursement this Period

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

/  /

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

/  /

Amount of Each Disbursement this Period

Memo Item

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

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