

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Our Principles 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="2016"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="423922.86"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2739675.38"/>	<input type="text" value="18880380.74"/>
(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="3163598.24"/>	<input type="text" value="18880380.74"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="3095755.90"/>	<input type="text" value="18812538.40"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="67842.34"/>	<input type="text" value="67842.34"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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

Our Principles 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).....	2693374.50	18612929.50
(ii) Unitemized	1900.88	21613.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2695275.38	18634543.38
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	200000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2695275.38	18834543.38
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).....	44400.00	45837.36
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))..... ▶	2739675.38	18880380.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2739675.38	18880380.74

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	-253890.46	519144.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	-253890.46	519144.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	3349646.36	18283394.30
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	10000.00
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)) ..	3095755.90	18812538.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3095755.90	18812538.40

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)	2695275.38	18834543.38
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2695275.38	18834543.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-253890.46	519144.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	44400.00	45837.36
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-298290.46	473306.74

**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 51
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. Katharine Birkett

Mailing Address 10 Sampson Street, #310

City State Zip Code
Saddle Brook NJ 07663

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

Name of Employer Occupation
n/a homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2016

Transaction ID : SA11AI.5503

Amount of Each Receipt this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Robert H. Castellini

Mailing Address 312 Elm Street, Suite 2600

City State Zip Code
Cincinnati OH 45202

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

Name of Employer Occupation
Castellini Company chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150000.00

Date of Receipt
MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SA11AI.5352

Amount of Each Receipt this Period
50000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Craig J. Duchossois

Mailing Address 845 Larch Avenue

City State Zip Code
Elmhurst IL 60126

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

Name of Employer Occupation
The Duchossois Group executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2016

Transaction ID : SA11AI.5506

Amount of Each Receipt this Period
100000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150300.00
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 51
	<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	

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)
Our Principles PAC

A. John Fox
Full Name (Last, First, Middle Initial)

Mailing Address 2116 E. 4th Avenue

City Denver State CO Zip Code 80206

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 08 / 2016
Transaction ID : SA11AI.5398

Amount of Each Receipt this Period
5000.00

Memo Item

B. I. Jerome Hirsch
Full Name (Last, First, Middle Initial)

Mailing Address 4455 E. Camelback Road, #A215

City Phoenix State AZ Zip Code 85018

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

Name of Employer Jaren Corporation Occupation executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
04 / 30 / 2016
Transaction ID : SA11AI.5572

Amount of Each Receipt this Period
5000.00

Memo Item

C. Mark Kingdon
Full Name (Last, First, Middle Initial)

Mailing Address 993 Fifth Avenue

City New York State NY Zip Code 10028

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

Name of Employer Kingdon Capital Management Occupation president

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
04 / 25 / 2016
Transaction ID : SA11AI.5483

Amount of Each Receipt this Period
25000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	35000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 51
	(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"/> 12
		<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)
Our Principles PAC

A. Roger Klein
Full Name (Last, First, Middle Initial)

Mailing Address 63 Beethoven Avenue

City Waban State MA Zip Code 02468

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

Name of Employer KR Boulevard Occupation manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2016
Transaction ID : SA11AI.5411

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Robert Liddell
Full Name (Last, First, Middle Initial)

Mailing Address 226 Old Farm Road

City Cranberry Twp State PA Zip Code 16066

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

Name of Employer n/a Occupation retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2016
Transaction ID : SA11AI.5406

Amount of Each Receipt this Period
 5000.00

Memo Item

C. Steve McCondichie
Full Name (Last, First, Middle Initial)

Mailing Address 141 Greenville Street

City Newnan State GA Zip Code 30263

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

Name of Employer MPM, Inc. Occupation real estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2016
Transaction ID : SA11AI.5477

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)
A. Donald Schmick

Mailing Address 10435 Timberstone Road

City Alpharetta	State GA	Zip Code 30022
--------------------	-------------	-------------------

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

Name of Employer n/a	Occupation retired
-------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2016
Transaction ID : SA11AI.5485

Amount of Each Receipt this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Paul Singer

Mailing Address 40 W. 57th Street, FL 30

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Elliott Management Corp.	Occupation c.e.o.
--	----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2016
Transaction ID : SA11AI.5505

Amount of Each Receipt this Period
1000000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Evan Sopher

Mailing Address 370 Lexington Avenue, #1104

City New York	State NY	Zip Code 10017
------------------	-------------	-------------------

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

Name of Employer The Sopher Group	Occupation real estate broker
--------------------------------------	----------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2016
Transaction ID : SA11AI.5392

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<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	

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)
Our Principles PAC

A. Warren A. Stephens
Full Name (Last, First, Middle Initial)

Mailing Address 111 Center Street

City Little Rock State AR Zip Code 72201

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

Name of Employer Stephens, Inc. Occupation chairman, president and ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500000.00

Date of Receipt
04 / 18 / 2016
Transaction ID : SA11AI.5415

Amount of Each Receipt this Period
500000.00

Memo Item

B. Marc I. Stern
Full Name (Last, First, Middle Initial)

Mailing Address 23700 Malibu Colony Road

City Malibu State CA Zip Code 90265

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

Name of Employer TCW Group, LLC Occupation chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
774.50

Date of Receipt
04 / 29 / 2016
Transaction ID : SA11AI.5597

Amount of Each Receipt this Period
774.50

Memo Item
In-kind - food and beverage

C. Michael K. Vlock
Full Name (Last, First, Middle Initial)

Mailing Address 984 Main Street

City Branford State CT Zip Code 06405

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

Name of Employer self-employed Occupation investor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700000.00

Date of Receipt
04 / 15 / 2016
Transaction ID : SA11AI.5412

Amount of Each Receipt this Period
1000000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500774.50

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 11 OF 51
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Our Principles PAC

Full Name (Last, First, Middle Initial) A. Mary Wutke		Date of Receipt MM / DD / YYYY 04 / 27 / 2016 Transaction ID : SA11AI.5508
Mailing Address 6666 Odana Road, #215		Amount of Each Receipt this Period 250.00
City Madison	State WI	Zip Code 53719
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer self-employed	Occupation finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Mary Wutke		Date of Receipt MM / DD / YYYY 04 / 29 / 2016 Transaction ID : SA11AI.5564
Mailing Address 6666 Odana Road, #215		Amount of Each Receipt this Period 250.00
City Madison	State WI	Zip Code 53719
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer self-employed	Occupation finance	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Memo Item <input type="checkbox"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	2693374.50

**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 51
<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)
Our Principles PAC

A. Full Name (Last, First, Middle Initial)
Content Creative Media, LLC

Mailing Address 3380 Tremont Road
Suite 290

City Columbus State OH Zip Code 43221

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
44400.00

Date of Receipt
MM / DD / YYYY
04 / 04 / 2016

Transaction ID : SA15.5386

Amount of Each Receipt this Period
44400.00

Memo Item
refund media placement

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	44400.00
TOTAL This Period (last page this line number only).....▶	44400.00

**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

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)
Our Principles PAC

A. CRC Public Relations

Full Name (Last, First, Middle Initial)

Mailing Address 2760 Eisenhower Avenue
4th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Public relations consulting/non-candidate

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 26 / 2016

Transaction ID : SB21B.5487

Amount of Each Disbursement this Period: 35000.00

Memo Item

B. DDC Advocacy

Full Name (Last, First, Middle Initial)

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement Direct voter contact-printing/see Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SB21B.5335

Amount of Each Disbursement this Period: -2125.00

Memo Item

C. DDC Advocacy

Full Name (Last, First, Middle Initial)

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement Direct voter contact-see Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SB21B.5338

Amount of Each Disbursement this Period: -20000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12875.00

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"/> 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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Meeting attendance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5435

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5543

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Political strategy consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.5545

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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Messaging production-not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.5546

Amount of Each Disbursement this Period

8900.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DDC Advocacy

Mailing Address 805 15th Street, N.W.
Suite 300

City Washington State DC Zip Code 20005

Purpose of Disbursement
Advertising-not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.5556

Amount of Each Disbursement this Period

3150.00

Memo Item

Full Name (Last, First, Middle Initial)

C. eDonations.com

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online fundraising

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2016

Transaction ID : SB21B.5400

Amount of Each Disbursement this Period

611.68

Memo Item

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

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

12661.68

**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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. eDonations.com

Mailing Address 117 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Online fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : SB21B.5539

Amount of Each Disbursement this Period

6113.24

Memo Item

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement-see Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SB21B.5366

Amount of Each Disbursement this Period

-1050.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement-see Line 24

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2016

Transaction ID : SB21B.5369

Amount of Each Disbursement this Period

-37490.00

Memo Item

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

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

-32426.76

**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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2016

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

Transaction ID : SB21B.5373

City Towson State MD Zip Code 21204

Amount of Each Disbursement this Period

-330767.42

Purpose of Disbursement
Media placement-see Line 24

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		02		2016

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

Transaction ID : SB21B.5376

City Towson State MD Zip Code 21204

Amount of Each Disbursement this Period

-47491.03

Purpose of Disbursement
Advertising-see Line 24

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. Mentzer Media Services, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		21		2016

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

Transaction ID : SB21B.5447

City Towson State MD Zip Code 21204

Amount of Each Disbursement this Period

2673.00

Purpose of Disbursement
Media placement-not disseminated

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Memo Item

State: District:

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

-375585.45

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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Media placement-not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 28 / 2016

Transaction ID : **SB21B.5527**

Amount of Each Disbursement this Period

1160.54

Memo Item

Full Name (Last, First, Middle Initial)

B. Mentzer Media Services, Inc.

Mailing Address 210 W. Pennsylvania Avenue
Suite 250

City Towson State MD Zip Code 21204

Purpose of Disbursement
Advertising-not disseminated

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : **SB21B.5534**

Amount of Each Disbursement this Period

38800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Elliott Schwartz

Mailing Address 3232 Coral Way, Unit 403

City Miami State FL Zip Code 33145

Purpose of Disbursement
Research

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2016

Transaction ID : **SB21B.5404**

Amount of Each Disbursement this Period

6000.00

Memo Item

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

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

45960.54

**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

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)
Our Principles PAC

Full Name (Last, First, Middle Initial)

A. Marc I. Stern

Mailing Address 23700 Malibu Colony Road

City Malibu State CA Zip Code 90265

Purpose of Disbursement
In-kind - food and beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2016

Transaction ID : **SB21B.5598**

Amount of Each Disbursement this Period

774.50

Memo Item

Full Name (Last, First, Middle Initial)

B. TargetPoint Consulting, Inc.

Mailing Address 66 Canal Center Plaza, #555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Research

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

Transaction ID : **SB21B.5426**

Amount of Each Disbursement this Period

24074.03

Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance Group, Inc.

Mailing Address 201 N. Union Street
Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Survey

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2016

Transaction ID : **SB21B.5416**

Amount of Each Disbursement this Period

32901.00

Memo Item

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

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

57749.53

-253890.46

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Campaign Solutions
Mailing Address: 117 N. St. Asaph Street
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Voter contact-emails
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 19150.00
Transaction ID: SE.5520
Date of Disbursement or Obligation: 04/29/2016
Calendar Year-To-Date Per Election for Office Sought: 1777713.87
Disbursement For: Primary

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington, State: DC, Zip Code: 20005
Purpose of Expenditure: Direct voter contact-printing
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 2125.00
Transaction ID: SE.5336
Date of Disbursement or Obligation: 04/01/2016
Calendar Year-To-Date Per Election for Office Sought: 6785.50
Disbursement For: Primary

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 21275.00. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (c) TOTAL Independent Expenditures.

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 2000.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Direct voter contact	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought 26785.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 3150.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought 29935.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	23150.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 5000.00
City State Zip Code Washington DC 20005	Transaction ID : SE.5362 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ND</u>
Calendar Year-To-Date Per Election for Office Sought 34935.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 02 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 2062.78
City State Zip Code Washington DC 20005	Transaction ID : SE.5364 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 04 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 2052446.57	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7062.78
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Online advertising
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 16125.00
Transaction ID: SE.5405
Date of Disbursement or Obligation: 04/12/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 2069721.92

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Voter contact-telephone calls
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 1185.00
Transaction ID: SE.5408
Date of Disbursement or Obligation: 04/13/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 1846.00

(a) SUBTOTAL of Itemized Independent Expenditures: 17310.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 14 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 2617.50
City State Zip Code Washington DC 20005	Transaction ID : SE.5409 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2016
Purpose of Expenditure Direct voter contact-printing	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WY</u>
Calendar Year-To-Date Per Election for Office Sought 4463.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 14 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 2500.00
City State Zip Code Washington DC 20005	Transaction ID : SE.5410 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 13 / 2016
Purpose of Expenditure Direct voter contact-facility use	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WY</u>
Calendar Year-To-Date Per Election for Office Sought 6963.50	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5117.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 17 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 32233.80
City State Zip Code Washington DC 20005	Transaction ID : SE.5417 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 73159.77	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 18 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 57778.37
City State Zip Code Washington DC 20005	Transaction ID : SE.5427 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 130938.14	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	90012.17
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 19 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 57778.37
City State Zip Code Washington DC 20005	
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 188716.51	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.5428

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 18 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 50000.00
City State Zip Code Washington DC 20005	
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought 238716.51	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.5429

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	107778.37
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 5152.20
City State Zip Code Washington DC 20005	Transaction ID : SE.5431 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought 368433.20	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 21 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 7800.00
City State Zip Code Washington DC 20005	Transaction ID : SE.5433 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Direct voter contact	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought 7800.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	12952.20
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 35934.77
City State Zip Code Washington DC 20005	Transaction ID : SE.5437 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 404367.97	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 23 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 49804.60
City State Zip Code Washington DC 20005	Transaction ID : SE.5440 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought 454172.57	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	85739.37
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text"/>
City Washington	State DC
Zip Code 20005	Transaction ID : SE.5443
Purpose of Expenditure Direct mail services	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
<input type="text"/>	<input type="text"/>

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text"/>
City Washington	State DC
Zip Code 20005	Transaction ID : SE.5454
Purpose of Expenditure Voter contact-telephone calls	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
<input type="text"/>	<input type="text"/>

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

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

Jamie Jodoin
Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 23 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 5152.20
City State Zip Code Washington DC 20005	Transaction ID : SE.5456 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought 466664.45	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 5152.20
City State Zip Code Washington DC 20005	Transaction ID : SE.5459 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MD</u>
Calendar Year-To-Date Per Election for Office Sought 471816.65	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	10304.40
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 22 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 7405.74
City State Zip Code Washington DC 20005	Transaction ID : SE.5466 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 15205.74	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 23 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 7405.74
City State Zip Code Washington DC 20005	Transaction ID : SE.5468 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 25 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 22611.48	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	14811.48
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	---

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

Full Name of Payee DDC Advocacy	Memo Item <input type="checkbox"/>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Voter contact-telephone calls	Category/Type <input type="text"/>	Transaction ID : SE.5470 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
	<input type="text"/> 30017.22	

Full Name of Payee DDC Advocacy	Memo Item <input type="checkbox"/>	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Online advertising	Category/Type <input type="text"/>	Transaction ID : SE.5472 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/>	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
	<input type="text"/> 953546.18	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/> 57405.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

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

Signature Jamie Jodoin [Electronically Filed] Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC		FEC IDENTIFICATION NUMBER ▼ C C00603621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016	
Mailing Address 805 15th Street, N.W. Suite 300				Amount 12000.00	
City Washington	State DC	Zip Code 20005		Transaction ID : SE.5475	
Purpose of Expenditure Direct voter contact		Category/Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		12000.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Convention	

Full Name of Payee DDC Advocacy		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 25 / 2016	
Mailing Address 805 15th Street, N.W. Suite 300				Amount 3500.50	
City Washington	State DC	Zip Code 20005		Transaction ID : SE.5489	
Purpose of Expenditure Direct voter contact-printing		Category/Type		Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 26 / 2016	
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		15500.50		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ Convention	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	15500.50
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	[Empty Box]
(c) TOTAL Independent Expenditures..... ▶	[Empty Box]

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
Signature **05 / 20 / 2016**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 04 / 28 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text"/> 4688.64
City State Zip Code Washington DC 20005	Transaction ID : SE.5496 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 04 / 26 / 2016
Purpose of Expenditure Direct voter contact-telephone calls	Category/Type <input type="text"/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4688.64	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input checked="" type="checkbox"/> Other (specify) ▶ <u>Convention</u>

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 04 / 28 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount <input type="text"/> 80021.55
City State Zip Code Washington DC 20005	Transaction ID : SE.5499 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 04 / 26 / 2016
Purpose of Expenditure Direct mail services	Category/Type <input type="text"/>
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1033567.73	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text"/> 84710.19
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

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

Jamie Jodoin [Electronically Filed] Date / /
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 29 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 91267.64
City State Zip Code Washington DC 20005	Transaction ID : SE.5501 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 26 / 2016
Purpose of Expenditure Direct mail services	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought 1124835.37	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 28 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 98956.80
City State Zip Code Washington DC 20005	Transaction ID : SE.5540 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 29 / 2016
Purpose of Expenditure Voter contact-telephone calls	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought 1932670.67	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	190224.44
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct voter contact/printing/shipping
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 4827.81
Transaction ID: SE.5547
Date of Disbursement or Obligation: 04/29/2016
Disbursement For: Other (specify) Convention

Full Name of Payee: DDC Advocacy
Mailing Address: 805 15th Street, N.W. Suite 300
City: Washington State: DC Zip Code: 20005
Purpose of Expenditure: Direct voter contact/printing/shipping
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 4827.81
Transaction ID: SE.5548
Date of Disbursement or Obligation: 04/29/2016
Disbursement For: Other (specify) Convention

Table with 2 columns: Description and Amount. Row (a) SUBTOTAL of Itemized Independent Expenditures: 9655.62. Row (b) SUBTOTAL of Unitemized Independent Expenditures. Row (c) TOTAL Independent Expenditures.

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 6327.81
City State Zip Code Washington DC 20005	Transaction ID : SE.5549 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2016
Purpose of Expenditure Direct voter contact/printing/shipping	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought 6327.81	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2016
Mailing Address 805 15th Street, N.W. Suite 300	Amount 5128.21
City State Zip Code Washington DC 20005	Transaction ID : SE.5551 Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 04 / 29 / 2016
Purpose of Expenditure Online advertising	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought 11456.02	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	11456.02
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature _____

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	---

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

Full Name of Payee DDC Advocacy	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Voter contact-telephone calls	Category/Type <input type="text"/>	Transaction ID : SE.5553 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee DDC Advocacy	<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 805 15th Street, N.W. Suite 300		Amount <input type="text"/>
City Washington	State DC	Zip Code 20005
Purpose of Expenditure Online advertising	Category/Type <input type="text"/>	Transaction ID : SE.5555 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate Donald J. Trump	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<input type="text"/>
(c) TOTAL Independent Expenditures..... ▶	<input type="text"/>

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

Jamie Jodoin
Signature

[Electronically Filed]

Date / /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee
Granite Lists, LLC
Mailing Address
1283 Main Street
City
Dublin State
NH Zip Code
03444
Purpose of Expenditure
Voter contact-emails
Category/Type
Date of Public Distribution/Dissemination
04 / 02 / 2016
Amount
3000.00
Transaction ID : SE.5358
Date of Disbursement or Obligation
04 / 01 / 2016
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Office Sought:
President
Senate
State: WI
Calendar Year-To-Date
Per Election for Office Sought
1633585.34
Disbursement For:
Primary
General
Other (specify)

Full Name of Payee
KyZle.com, LLC
Mailing Address
6825 Covington Creek Trail
City
Fort Wayne State
IN Zip Code
46804
Purpose of Expenditure
Online advertising
Category/Type
Date of Public Distribution/Dissemination
04 / 29 / 2016
Amount
16000.00
Transaction ID : SE.5523
Date of Disbursement or Obligation
04 / 29 / 2016
Name of Federal Candidate
Donald J. Trump
Support
Oppose
Office Sought:
President
Senate
State: IN
Calendar Year-To-Date
Per Election for Office Sought
1793713.87
Disbursement For:
Primary
General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 19000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

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

Jamie Jodoin
[Electronically Filed]
Date
05 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621

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

Full Name of Payee: McCarthy Hennings Whalen, Inc.
Mailing Address: 1850 M Street, N.W., #235
City: Washington, State: DC, Zip Code: 20036
Purpose of Expenditure: Media production
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 2187.48
Transaction ID: SE.5445

Full Name of Payee: McCarthy Hennings Whalen, Inc.
Mailing Address: 1850 M Street, N.W., #235
City: Washington, State: DC, Zip Code: 20036
Purpose of Expenditure: Media production
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 12671.68
Transaction ID: SE.5452

(a) SUBTOTAL of Itemized Independent Expenditures: 14859.16
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Jamie Jodoin
[Electronically Filed]
Date: 05 / 20 / 2016
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
--	--

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

Full Name of Payee McCarthy Hennings Whalen, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 29 / 2016
Mailing Address 1850 M Street, N.W., #235	Amount 27567.22
City State Zip Code Washington DC 20036	Transaction ID : SE.5559 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 29 / 2016
Purpose of Expenditure Media production	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IN</u>
Calendar Year-To-Date Per Election for Office Sought 2090053.89	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 1050.00
City State Zip Code Towson MD 21204	Transaction ID : SE.5367 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought 1634635.34	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	28617.22
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Our Principles PAC	FEC IDENTIFICATION NUMBER ▼ C C00603621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 37490.00
City State Zip Code Towson MD 21204	Transaction ID : SE.5370 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1672125.34	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee Mentzer Media Services, Inc. <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Mailing Address 210 W. Pennsylvania Avenue Suite 250	Amount 330767.42
City State Zip Code Towson MD 21204	Transaction ID : SE.5372 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 01 / 2016
Purpose of Expenditure Media placement	Category/Type
Name of Federal Candidate Donald J. Trump <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 2002892.76	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	368257.42
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Jamie Jodoin [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
05 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 210 W. Pennsylvania Avenue, Suite 250, Towson, MD 21204
Purpose of Expenditure: Advertising
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 47491.03
Transaction ID: SE.5377
Date of Disbursement or Obligation: 04/02/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 2050383.79

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 210 W. Pennsylvania Avenue, Suite 250, Towson, MD 21204
Purpose of Expenditure: Media placement
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 312281.00
Transaction ID: SE.5448
Date of Disbursement or Obligation: 04/21/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 363281.00

(a) SUBTOTAL of Itemized Independent Expenditures: 359772.03
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 210 W. Pennsylvania Avenue, Suite 250, Towson, MD 21204
Purpose of Expenditure: Media placement
Name of Federal Candidate: Donald J. Trump
Date of Public Distribution/Dissemination: 04/23/2016
Amount: 685046.00
Transaction ID: SE.5450
Date of Disbursement or Obligation: 04/21/2016
Office Sought: President
Disbursement For: Primary

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 210 W. Pennsylvania Avenue, Suite 250, Towson, MD 21204
Purpose of Expenditure: Media placement
Name of Federal Candidate: Donald J. Trump
Date of Public Distribution/Dissemination: 04/29/2016
Amount: 598839.46
Transaction ID: SE.5525
Date of Disbursement or Obligation: 04/28/2016
Office Sought: President
Disbursement For: Primary

(a) SUBTOTAL of Itemized Independent Expenditures: 1283885.46
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: Jamie Jodoin
Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: Mentzer Media Services, Inc.
Mailing Address: 210 W. Pennsylvania Avenue, Suite 250, Towson, MD 21204
Purpose of Expenditure: Media placement
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 40000.00
Transaction ID: SE.5531
Date of Disbursement or Obligation: 04/29/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 1833713.87

Full Name of Payee: Targeted Victory
Mailing Address: 1033 N. Fairfax Street, Suite 400, Alexandria, VA 22314
Purpose of Expenditure: Voter contact-emails
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Amount: 1150.35
Transaction ID: SE.5355
Date of Disbursement or Obligation: 04/01/2016
Disbursement For: Primary
Calendar Year-To-Date Per Election for Office Sought: 1630585.34

(a) SUBTOTAL of Itemized Independent Expenditures: 41150.35
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Signature: Jamie Jodoin
Date: 05/20/2016
[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: TargetPoint Consulting, Inc.
Mailing Address: 66 Canal Center Plaza, #555
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Research
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 21666.69
Transaction ID: SE.5420
Date of Disbursement or Obligation: 04/19/2016

Full Name of Payee: TargetPoint Consulting, Inc.
Mailing Address: 66 Canal Center Plaza, #555
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Research
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 9629.64
Transaction ID: SE.5424
Date of Disbursement or Obligation: 04/19/2016

(a) SUBTOTAL of Itemized Independent Expenditures: 31296.33
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Our Principles PAC
FEC IDENTIFICATION NUMBER
C C00603621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee: TargetPoint Consulting, Inc.
Mailing Address: 66 Canal Center Plaza, #555
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Research
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 9629.64
Transaction ID: SE.5425
Date of Disbursement or Obligation: 04/19/2016

Full Name of Payee: TargetPoint Consulting, Inc.
Mailing Address: 66 Canal Center Plaza, #555
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Research
Name of Federal Candidate: Donald J. Trump
Office Sought: President
Disbursement For: Primary
Amount: 34260.00
Transaction ID: SE.5518
Date of Disbursement or Obligation: 04/29/2016

Table with 2 columns: Description and Amount.
(a) SUBTOTAL of Itemized Independent Expenditures: 43889.64
(b) SUBTOTAL of Unitemized Independent Expenditures:
(c) TOTAL Independent Expenditures: 3349646.36

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

Signature: Jamie Jodoin [Electronically Filed] Date: 05/20/2016