

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
EAGLE PAC

ADDRESS (number and street) **PO Box 6312**
Check if different than previously reported. (ACC) **Libertyville IL 60048**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00572123 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on **11** / **08** / **2016** in the State of **IL**

5. Covering Period **10** / **20** / **2016** through **11** / **28** / **2016**

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

Signature of Treasurer **Kilgore, Paul, , ,** [Electronically Filed] Date **11** / **30** / **2016**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

EAGLE 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"/>		47853.52
(b) Cash on Hand at Beginning of Reporting Period.....	82071.98	
(c) Total Receipts (from Line 19)	8179.74	121448.82
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	90251.72	169302.34
7. Total Disbursements (from Line 31).....	7833.39	86884.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	82418.33	82418.33
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

EAGLE PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5000.00	40250.00
(ii) Unitemized	0.00	257.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5000.00	40507.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	64000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5000.00	104507.00
12. Transfers From Affiliated/Other Party Committees.....	3179.74	12261.82
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	80.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	4600.00
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)).....▶	8179.74	121448.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8179.74	121448.82

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	833.39	9184.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	833.39	9184.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	77700.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	7833.39	86884.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7833.39	86884.01

DETAILED SUMMARY PAGE
of Disbursements

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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)	5000.00	104507.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5000.00	104507.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	833.39	9184.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	80.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	833.39	9104.01

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

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

FOR LINE NUMBER: PAGE 6 OF 11
(check only one)

<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
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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)
EAGLE PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Perez, William, D, ,

Mailing Address 81 Seagate Dr 1603

City Naples	State FL	Zip Code 34103
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	21	/	2016

Transaction ID : SA11AI.4469

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EAGLE PAC

A. THE EAGLE PAC/ROSKAM PAC JOINT COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C** C00610790

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3179.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA12.4483

Amount of Each Receipt this Period
3179.74

Memo Item
Transfer of Net JFC Distribution

B. THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 171 N. CLARK STREET
SUITE 200

City CHICAGO	State IL	Zip Code 60601
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FEC ID number of contributing federal political committee. **C** C00408260

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA12.4483.0

Amount of Each Receipt this Period
2500.00

Memo Item

C. ALLSTATE INSURANCE COMPANY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2775 SANDERS ROAD SUITE A2W

City NORTHBROOK	State IL	Zip Code 60062
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FEC ID number of contributing federal political committee. **C** C00040253

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2016

Transaction ID : SA12.4483.1

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3179.74
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 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
EAGLE PAC

A. MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1455 PENNSYLVANIA AVENUE, NW
SUITE 900

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00075341

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA12.4483.2

Amount of Each Receipt this Period
750.00

Memo Item

B. SOUTHWEST AIRLINES PILOTS' ASSOCIATION POLITICAL ACTION COMMITTEE (SWAPA PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1450 EMPIRE CENTRAL DR SUITE 737

City DALLAS State TX Zip Code 75247

FEC ID number of contributing federal political committee. **C** C00360669

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2016

Transaction ID : SA12.4483.3

Amount of Each Receipt this Period
2500.00

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	3179.74

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EAGLE PAC

A. Professional Data Services, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 824 S Millledge Ave, Ste 101

City Athens State GA Zip Code 30605

Purpose of Disbursement PAC Compliance Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4480

Amount of Each Disbursement this Period: 638.09

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	638.09
TOTAL This Period (last page this line number only).....▶	638.09

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
EAGLE PAC

A. Citizens for Mike Nerheim

Full Name (Last, First, Middle Initial)

Mailing Address 438 N Sheridan Rd

City Waukegan State IL Zip Code 60085

Purpose of Disbursement Contribution (State/Local Committee) 011 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 31 / 2016

FEC Identification Number **C**

Transaction ID : SB23.4477

Amount of Each Disbursement this Period 1000.00

Memo Item

B. COMSTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 831

City MC LEAN State VA Zip Code 22101

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name **COMSTOCK, BARBARA, J, Hon.,**

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: VA District: 10

Date of Disbursement 10 / 28 / 2016

FEC Identification Number **C** C0054261

Transaction ID : SB23.4472

Amount of Each Disbursement this Period 2500.00

Memo Item

C. HURD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 761029

City SAN ANTONIO State TX Zip Code 78245

Purpose of Disbursement Contribution 011 Category/Type

Candidate Name **HURD, WILLIAM, , ,**

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: TX District: 23

Date of Disbursement 10 / 28 / 2016

FEC Identification Number **C** C00545467

Transaction ID : SB23.4476

Amount of Each Disbursement this Period 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6000.00

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

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NAME OF COMMITTEE (In Full)
EAGLE PAC

Full Name (Last, First, Middle Initial) A. ROS-LEHTINEN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 11 / 09 / 2016
Mailing Address PO BOX 522784		FEC Identification Number C C00280537 Transaction ID : SB23.4493
City MIAMI	State FL	Zip Code 33152
Purpose of Disbursement Contribution		Category/ Type 011
Candidate Name ROS-LEHTINEN, ILEANA, , , Hon.		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 27	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	
<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	7000.00