

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.
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

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

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

5. Covering Period 07 / 01 / 2015 through 07 / 31 / 2015

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 Amy Rider

Signature of Treasurer Amy Rider [Electronically Filed] Date 08 / 12 / 2015

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA 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="2015"/>	<input type="text" value="92448.77"/>	<input type="text" value="92448.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="152618.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6920.00"/>	<input type="text" value="149340.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="159538.77"/>	<input type="text" value="241788.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="43250.00"/>	<input type="text" value="125500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="116288.77"/>	<input type="text" value="116288.77"/>
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

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA 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).....	6000.00	145840.00
(ii) Unitemized	320.00	2900.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6320.00	148740.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	600.00	600.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6920.00	149340.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6920.00	149340.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6920.00	149340.00

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	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	43250.00	125500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
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)) ..	43250.00	125500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43250.00	125500.00

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)	6920.00	149340.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6920.00	149340.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 OF 17
	<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)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A. James E Farish Jr.
 Full Name (Last, First, Middle Initial)
 Mailing Address 22 S. Main
 City Greenville State SC Zip Code 29601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Lincoln Energy Occupation CEO
 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
 07 / 27 / 2015
Transaction ID : SA11AI.7109
 Amount of Each Receipt this Period
2500.00

B. Erin Robinson Graziosi
 Full Name (Last, First, Middle Initial)
 Mailing Address 955 Martin Avenue
 City Santa Clara State CA Zip Code 95050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Robinson Oil Company Occupation Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2015
Transaction ID : SA11AI.7102
 Amount of Each Receipt this Period
750.00

C. Doug Hartley
 Full Name (Last, First, Middle Initial)
 Mailing Address 319 Wheeling Ave
 City Cambridge State OH Zip Code 43725
 FEC ID number of contributing federal political committee. **C**
 Name of Employer The Hartley Company Occupation President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015
Transaction ID : SA11AI.7101
 Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....	3500.00
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 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

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

Mailing Address 5163 Wolfpen Pleasant Hill Rd

City Milford State OH Zip Code 45150

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

Name of Employer Lykins Oil Occupation VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 23 / 2015
Transaction ID : SA11AI.7107

Amount of Each Receipt this Period 1000.00

B. Kerry Oliver
Full Name (Last, First, Middle Initial)

Mailing Address 6000 Metcalf Avenue Suite 200

City Overland Park State KS Zip Code 66202

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

Name of Employer Carter Energy Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 10 / 2015
Transaction ID : SA11AI.7100

Amount of Each Receipt this Period 100.00

C. Justin Schmidt
Full Name (Last, First, Middle Initial)

Mailing Address 5500 Cenex Dr MS 581

City Inver Grove Heights State MN Zip Code 55077

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

Name of Employer CHS Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 24 / 2015
Transaction ID : SA11AI.7108

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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 17
(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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NAME OF COMMITTEE (In Full)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A. Full Name (Last, First, Middle Initial)
William B Weigel

Mailing Address **PO BOX 650**

City **Powell** State **TN** Zip Code **37849**

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

Name of Employer **Rocket Oil Co.** Occupation **Chairman**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 07 / 2015

Transaction ID : SA11AI.7096

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	6000.00

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

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NAME OF COMMITTEE (In Full)
SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

A. Full Name (Last, First, Middle Initial)
PESTER MARKETING COMPANY / ALTA FUELS LLC PAC

Mailing Address 4643 S ULSTER ST
SUITE 350

City DENVER State CO Zip Code 80237

FEC ID number of contributing federal political committee. **C** C00529578

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
07 / 02 / 2015

Transaction ID : SA11C.7094

Amount of Each Receipt this Period
600.00

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

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

SUBTOTAL of Receipts This Page (optional).....▶	600.00
TOTAL This Period (last page this line number only).....▶	600.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. ADERHOLT, ROBERT B. REP.

Mailing Address PO BOX 1158

City State Zip Code
HALEYVILLE AL 35565

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: AL District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7114

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. CLAY JR. FOR CONGRESS

Mailing Address PO BOX 4544

City State Zip Code
ST. LOUIS MO 63108

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MO District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7124

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. COLE FOR CONGRESS

Mailing Address P.O. Box 722256

City State Zip Code
Norman OK 73070

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: OK District: 04

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7136

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. COLLINS FOR CONGRESS

Mailing Address PO BOX 386

City CLARENCE State NY Zip Code 14031

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7111

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. CONGRESSMAN JOE BARTON COMMITTEE, THE

Mailing Address P.O. Box 1444

City Ennis State TX Zip Code 75120

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: TX District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7135

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRENCH HILL FOR ARKANSAS

Mailing Address PO BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7121

Amount of Each Disbursement this Period

2000.00

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

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

6000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM CLYBURN

Mailing Address PO BOX 12567

City COLUMBIA State SC Zip Code 29211

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: SC District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2015

Transaction ID : SB23.7123

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOE PITTS

Mailing Address PO BOX 775

City Unionville State PA Zip Code 19375

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: PA District: 16

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2015

Transaction ID : SB23.7117

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF SAM JOHNSON

Mailing Address P.O. BOX 860096

City PLANO State TX Zip Code 75086

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: TX District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2015

Transaction ID : SB23.7127

Amount of Each Disbursement this Period

750.00

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

4750.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. GREGG HARPER FOR CONGRESS

Mailing Address POST OFFICE BOX 54344

City PEARL State MS Zip Code 39288

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: MS District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7122

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. KATHERINE CLARK FOR CONGRESS

Mailing Address PO BOX 361

City MALDEN State MA Zip Code 02148

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: MA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7133

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Loretta Sanchez for Senate

Mailing Address P.O. Box 6037

City Santa Ana State CA Zip Code 92706

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: CA District: 00

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	06	/	2015

Transaction ID : SB23.7132

Amount of Each Disbursement this Period

2500.00

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

6500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. LUCAS FOR CONGRESS

Mailing Address Post Office Box 1726
Post Office Box 1726

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: OK District: 03

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1		2	0	1	5		

Transaction ID : SB23.7115

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. MATSUI FOR CONGRESS

Mailing Address PO BOX 1738

City SACRAMENTO State CA Zip Code 95812

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: CA District: 05

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1		2	0	1	5		

Transaction ID : SB23.7137

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. MCKINLEY FOR CONGRESS

Mailing Address PO BOX 642

City MORGANTOWN State WV Zip Code 26507

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: WV District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1		2	0	1	5		

Transaction ID : SB23.7112

Amount of Each Disbursement this Period

2	0	0	.	0	0
---	---	---	---	---	---

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

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

6	0	0	.	0	0
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2	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. RENEE ELLMERS FOR CONGRESS COMMITTEE

Mailing Address PO BOX 99567

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: NC District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7110

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City MANKATO State MN Zip Code 56002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: MN District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7125

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. VOLUNTEERS FOR SHIMKUS

Mailing Address PO Box 5458
PO BOX 5458

City Springfield State IL Zip Code 62705

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: IL District: 19

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7113

Amount of Each Disbursement this Period

2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC

Full Name (Last, First, Middle Initial)

A. WHITFIELD FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: KY District: 01

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	21	/	2015

Transaction ID : SB23.7118

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

2000.00

43250.00
