

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
Crowley Maritime Corporation Federal PAC

ADDRESS (number and street) 9487 Regency Square Blvd.
Check if different than previously reported. (ACC) Jacksonville FL 32225

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00147231
3. IS THIS REPORT NEW OR AMENDED (A)
 NEW (N)  AMENDED (A)

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

5. Covering Period 04 / 01 / 2017 through 04 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Mead, Arthur, , Mr., III
Type or Print Name of Treasurer

Signature of Treasurer Mead, Arthur, , Mr., III [Electronically Filed] Date 08 / 18 / 2017

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

**Crowley Maritime Corporation Federal 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="2017"/>		44175.85
(b) Cash on Hand at Beginning of Reporting Period.....	47433.67	
(c) Total Receipts (from Line 19) .....	8860.32	35294.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	56293.99	79470.45
7. Total Disbursements (from Line 31).....	5087.70	28264.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	51206.29	51206.29
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Crowley Maritime Corporation Federal 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).....	7069.32	24293.14
(ii) Unitemized .....	1791.00	11001.46
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8860.32	35294.60
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	8860.32	35294.60
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)).....▶	8860.32	35294.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	8860.32	35294.60

**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 .....	87.70	4264.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	87.70	4264.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	24000.00
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)) ..	5087.70	28264.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5087.70	28264.16

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	8860.32	35294.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8860.32	35294.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	87.70	4264.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	87.70	4264.16

**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 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Andersen, Raymond, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8744 Rolling Brook Lane

City Jacksonville	State FL	Zip Code 32256
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Vice President
-------------------------------------------------------------------	-----------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14746**

Amount of Each Receipt this Period  
60.00

Memo Item  
 Payroll Deduction

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

Mailing Address 9487 Regency Sq Blvd N

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Vice President
-------------------------------------------------------------------	-----------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14747**

Amount of Each Receipt this Period  
100.00

Memo Item  
 Payroll Deduction

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

Mailing Address P.O. Box 23894

City Jacksonville	State FL	Zip Code 32241
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Director, Transportation & Equipment
-------------------------------------------------------------------	---------------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14748**

Amount of Each Receipt this Period  
100.00

Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	260.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Baris, Sharon, E, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Square Blvd. N.  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Occupation (for Individual) Director, Contract Administration  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.28

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14749**  
 Amount of Each Receipt this Period 83.32  
 Memo Item  
 Payroll Deduction

**B. Busch, Allen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6560 NW 95th Lane  
 City Parkland State FL Zip Code 33076  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vessel Management Services Inc Occupation (for Individual) Senior VP & General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14752**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction

**C. Calvin, John, , Mr., Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1925 Sevilla Boulevard, W.  
 City Atlantic Beach State FL Zip Code 32233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Senior Vice President & Controller  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14753**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	883.32
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Clarke, Owen, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Square Blvd  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 848.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14758**  
 Amount of Each Receipt this Period  
 255.00  
 Memo Item  
 Payroll Deduction

**B. Collar, Steve, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17 Carlton Road  
 City Flanders State NJ Zip Code 07836  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Vessel Management Services, In Occupation (for Individual) Senior VP and GM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14760**  
 Amount of Each Receipt this Period  
 400.00  
 Memo Item  
 Payroll Deduction

**C. Cords, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Sq Blvd N  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Technology  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 30 / 2017  
**Transaction ID : SA11AI.14761**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	730.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Cosgrove, Coleman, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12675 Ft. Caroline Rd  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP, Operations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14762**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**B. Douglas, Ira, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Square Blvd  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Marine Personnel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14766**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**C. Evans, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 127 St. Johns Forest Blvd.  
 City St. Johns State FL Zip Code 32259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP, Strategy  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14769**  
 Amount of Each Receipt this Period 200.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	400.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Ficon, Steve, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3226 Tabora Drive

City Antioch	State CA	Zip Code 94509
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP, Claims
-------------------------------------------------------------------	-------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14771**

Amount of Each Receipt this Period  
100.00

Memo Item  
Payroll Deduction

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

Mailing Address 501 Cane Mill Court

City Ponte Vedra Beach	State FL	Zip Code 32082
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Senior VP, Admin
-------------------------------------------------------------------	-------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14772**

Amount of Each Receipt this Period  
400.00

Memo Item  
Payroll Deduction

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

Mailing Address 5732 Clifton Avenue

City Jacksonville	State FL	Zip Code 32211
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP
-------------------------------------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
330.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14778**

Amount of Each Receipt this Period  
100.00

Memo Item  
Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Grune, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6576 163rd Place, SE  
 City Bellevue State WA Zip Code 98006  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Liner Services Inc. Occupation (for Individual) Senior VP & General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14779**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction

**B. Harrison, Parker, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Square Blvd. N.  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP, Procurement  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14780**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**C. Hilburn, Cofield, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Sq Blvd N  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Business Development & Log  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14782**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Holden, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 216 South Hampton Club Way  
 City St. Augustine State FL Zip Code 32092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director HR Technology and Admin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14783**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction

**B. Hourihan, John, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12534 Mission Hills Circle, S  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Liner Services, Inc. Occupation (for Individual) Senior VP & General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14784**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Payroll Deduction

**C. LaGoy, Edward, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Square Blvd  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Business Development  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14789**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	560.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. La Moureaux, Arthur, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14210 Saybrook Falls Court

City Jacksonville	State FL	Zip Code 32224
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP, Internal Audit
-------------------------------------------------------------------	---------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14787**

Amount of Each Receipt this Period  
100.00

Memo Item  
Payroll Deduction

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

Mailing Address 9487 Regency Square Blvd

City Jacksonville	State FL	Zip Code 32225
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Senior VP & General Manager
-------------------------------------------------------------------	------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1462.50

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14791**

Amount of Each Receipt this Period  
400.00

Memo Item  
Payroll Deduction

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

Mailing Address 1626 Hawks Nest Drive

City Orange Park	State FL	Zip Code 32003
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Vice President HR
-------------------------------------------------------------------	--------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14794**

Amount of Each Receipt this Period  
60.00

Memo Item  
Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	560.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Leming, Rudy, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 890 Fountain Drive  
 City Fernandina State FL Zip Code 32034  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Liner Services, Inc. Occupation (for Individual) VP, Labor Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 315.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14797**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**B. Mayo, Reme, D, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Sq Blvd N  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP, Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14802**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**C. Mead, Arthur, , Mr., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Hopson Road  
 City Jacksonville Beach State FL Zip Code 32250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP & General Counsel  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 365.00

Date of Receipt **04 / 30 / 2017**  
**Transaction ID : SA11AI.14803**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Mullins, Patrick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1853 Oakbreeze Court  
 City Jacksonville Beach State FL Zip Code 32250  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) Director, Equipment Control  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14808**  
 Amount of Each Receipt this Period 60.00  
 Memo Item  
 Payroll Deduction

**B. Noyer, Peter, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9487 Regency Sq Blvd N  
 City Jacksonville State FL Zip Code 32225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Crowley Maritime Corporation Occupation (for Individual) VP, National Accounts  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14812**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

**C. Orfanidis, Nicholas, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23 Newport Drive  
 City Manalapan State NJ Zip Code 07726-4530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marine Transport Management Occupation (for Individual) Director, Fleet Operations  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 04 / 30 / 2017  
**Transaction ID : SA11AI.14814**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	260.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 20
	<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Pennella, William, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 Heritage Oak Court

City Alamo	State CA	Zip Code 94507
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Vice Chairman & Executive VP
-------------------------------------------------------------------	-------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1664.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14816**

Amount of Each Receipt this Period  
416.00

Memo Item  
 Payroll Deduction

**B. Roberts, Michael, G., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9487 Regency Square Boulevard

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Senior VP & General Counsel
-------------------------------------------------------------------	------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14819**

Amount of Each Receipt this Period  
400.00

Memo Item  
 Payroll Deduction

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

Mailing Address 7720 A Island View Court

City Mukilteo	State WA	Zip Code 98275
------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP & Deputy General Counsel
-------------------------------------------------------------------	------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14821**

Amount of Each Receipt this Period  
100.00

Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	916.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 20
<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)  
**Crowley Maritime Corporation Federal PAC**

**A. Smith, Rockwell, , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 Prospect Terracce

City Tenafly	State NJ	Zip Code 07670
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Marine Transport Management	Occupation (for Individual) Senior VP & General Manager
------------------------------------------------------------------	------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14823**

Amount of Each Receipt this Period  
400.00

Memo Item  
 Payroll Deduction

**B. Sperling, Johan, F, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9487 Regency Sq Blvd N

City Jacksonville	State FL	Zip Code 32225
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP
-------------------------------------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14824**

Amount of Each Receipt this Period  
100.00

Memo Item  
 Payroll Deduction

**C. Warner, Daniel L., , Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 Cedar Street

City Neptune Beach	State FL	Zip Code 32266
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) Senior VP and Treasurer
-------------------------------------------------------------------	--------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14831**

Amount of Each Receipt this Period  
400.00

Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 18 OF 20  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Crowley Maritime Corporation Federal PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Yacavone, Matthew, , ,

Mailing Address 9487 Regency Sq Blvd N

City Jacksonville	State FL	Zip Code 32225
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Crowley Maritime Corporation	Occupation (for Individual) VP
-------------------------------------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04		30		2017

**Transaction ID : SA11AI.14834**

Amount of Each Receipt this Period  
100.00

Memo Item  
 Payroll Deduction

**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)
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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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	7069.32

**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)

**Crowley Maritime Corporation Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Wells Fargo**

Mailing Address 1 Independent Drive

City Jacksonville

State FL

Zip Code 32202

Purpose of Disbursement Client Analysis Service Charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 11 / 2017

FEC Identification Number

C [ ]

Transaction ID : SB21B.14835

Amount of Each Disbursement this Period

[ ] 87.70

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 87.70

[ ] 87.70

**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)  
**Crowley Maritime Corporation Federal PAC**

**A. MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Full Name (Last, First, Middle Initial)  
Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Political Contribution

Candidate Name  
**MCCONNELL FOR MAJORITY LEADER COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼

State: KY District: 00

Date of Disbursement: 04 / 13 / 2017

FEC Identification Number: C00548651  
Transaction ID : SB23.14837  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. SCALISE LEADERSHIP FUND**

Full Name (Last, First, Middle Initial)  
Mailing Address 317 15TH ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
Political Contribution

Candidate Name  
**SCALISE LEADERSHIP FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: LA District: 01

Date of Disbursement: 04 / 13 / 2017

FEC Identification Number: C00568162  
Transaction ID : SB23.14836  
Amount of Each Disbursement this Period: 2500.00

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

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