

# 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

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 121 N Henry Street

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00010124 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One) (b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)

(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)

(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  Convention (12C)  Special (12S)

Election on M M M / D 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 M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 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 Christian A Klein

Signature of Treasurer Christian A Klein [Electronically Filed] Date 07 / 27 / 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

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="21391.12"/>	<input type="text" value="21391.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="21391.12"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="40000.00"/>	<input type="text" value="40000.00"/>
(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="61391.12"/>	<input type="text" value="61391.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="31765.41"/>	<input type="text" value="31765.41"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29625.71"/>	<input type="text" value="29625.71"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 / 01 / 2015 To: 06 / 30 / 2015

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).....	37500.00	37500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	37500.00	37500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	40000.00	40000.00
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))..... ▶	40000.00	40000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	40000.00	40000.00

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	515.41	515.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	515.41	515.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31250.00	31250.00
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)) ..	31765.41	31765.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31765.41	31765.41

**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) .....	40000.00	40000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40000.00	40000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	515.41	515.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	515.41	515.41

**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 22
	<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)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Ron Bartlet**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5415 Castle Bend Way  
 City Yorba Linda State CA Zip Code 92887  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Bejac Corpoation Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 02 / 23 / 2015  
**Transaction ID : SA11AI.5663**  
 Amount of Each Receipt this Period 1500.00  
 Campaign Contribution

**B. Diane Benck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1908 W. Cortland St.  
 City Chicago State IL Zip Code 60622  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer West Side Tractor Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2015  
**Transaction ID : SA11AI.5657**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**C. Walter T Berry**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3550 N. 127th St. E.  
 City Wichita State KS Zip Code 67226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Berry Companies, Inc. Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 19 / 2015  
**Transaction ID : SA11AI.5644**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<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 7 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Michael Brennan**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7300 Blakemore Ct.  
City Prospect State KY Zip Code 40059  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bramco Occupation Construction equipment distributor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 10 / 2015  
**Transaction ID : SA11AI.5643**  
Amount of Each Receipt this Period 1000.00  
Campaign Contribution

**B. Gary Bridwell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3131 N. Coltrane Rd.  
City Edmond State OK Zip Code 73034-8352  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Ditch Witch of Oklahoma Occupation Construction Equipment Distribution  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : SA11AI.5649**  
Amount of Each Receipt this Period 1000.00  
Campaign Contribution

**C. Jonathan Campbell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8047 Farm Brook Way  
City Sandy State UT Zip Code 84093  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wheeler Machinery Occupation Construction Equipment Distributor  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 02 / 23 / 2015  
**Transaction ID : SA11AI.5659**  
Amount of Each Receipt this Period 500.00  
Campaign Contribution

**SUBTOTAL** of Receipts This Page (optional).....▶ 2500.00  
**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 8 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
	<input type="checkbox"/> 12 <input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Paul W Campbell**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 647 Mountain View Cir  
 City Salt Lake City State UT Zip Code 84054-3344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wheeler Machinery Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2015  
**Transaction ID : SA11AI.5656**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**B. Roy C Gaylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12440 Amberset Drive  
 City Knoxville State TN Zip Code 37922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Power Equipment Co. Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 25 / 2015  
**Transaction ID : SA11AI.5653**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**C. Lawrence F Glynn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8022 Rosiline Dr.  
 City Clayton State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CMW Equipment Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2015  
**Transaction ID : SA11AI.5658**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<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 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Dennis J Heller**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7201 Paxton Street  
 City Harrisburg State PA Zip Code 17111  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stephenson Equipment, Inc. Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : SA11AI.5637**  
 Amount of Each Receipt this Period 2500.00  
 Campaign Contribution

**B. Robert Henderson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 Hunter Drive Suite 220  
 City Oakbrook State IL Zip Code 60523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Associated Equipment Distribut Occupation Association executive  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1000.00

Date of Receipt 03 / 30 / 2015  
**Transaction ID : SA11AI.5654**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**C. Dale Leppo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3196 Silky Ln.  
 City Stow State OH Zip Code 44224-4751  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Leppo Rents/Bobcat of Akron Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 02 / 18 / 2015  
**Transaction ID : SA11AI.5635**  
 Amount of Each Receipt this Period 2500.00  
 Campaign Contribution

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
<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)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Joseph A Paradis III**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 98  
 City Goshen State KY Zip Code 40026-0098  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Brandeis Machinery & Supply Co Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2500.00**

Date of Receipt **02 / 10 / 2015**  
**Transaction ID : SA11AI.5634**  
 Amount of Each Receipt this Period **2500.00**  
 Campaign Contribution

**B. Michael Quirk**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2221 Table Drive  
 City Golden State CO Zip Code 80401  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Wagner Equipment Co. Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 04 / 2015**  
**Transaction ID : SA11AI.5651**  
 Amount of Each Receipt this Period **1000.00**  
 Campaign Contribution

**C. John A Riggs**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21 Ridgeview Dr  
 City Little Rock State AR Zip Code 72227  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer J. A. Riggs Tractor Co. Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **03 / 16 / 2015**  
**Transaction ID : SA11AI.5652**  
 Amount of Each Receipt this Period **1000.00**  
 Campaign Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>4500.00</b>
<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 11 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Mark Romer**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11047 Leadbetter Rd.  
 City Ashland State VA Zip Code 23005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer James River Equipment Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 25 / 2015  
**Transaction ID : SA11AI.5633**  
 Amount of Each Receipt this Period 5000.00  
 Campaign Contribution

**B. Donald Shilling**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2885 Lilac Ln N.  
 City Fargo State ND Zip Code 58102-1706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer General Equipment & Supplies Occupation Construction Equipment Distribution  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 18 / 2015  
**Transaction ID : SA11AI.5645**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**C. Michael Soley Jr.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address N60 W38422 Hawthorne Drive  
 City Oconomowoc State WI Zip Code 53066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Miller, Bradford & Risberg, In Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 03 / 2015  
**Transaction ID : SA11AI.5650**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7000.00  
**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 12 OF 22
	<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)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Harry W Stowers**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8733 Inlet Drive  
 City Knoxville State TN Zip Code 37922-6459  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Stowers Machinery Corporation Occupation Construction Equipment Distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 30 / 2015  
**Transaction ID : SA11AI.5642**  
 Amount of Each Receipt this Period 2500.00  
 Campaign Contribution

**B. Kenneth E Taylor**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19501 Argyle Oval  
 City Rocky River State OH Zip Code 44116-1604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Ohio CAT Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 02 / 18 / 2015  
**Transaction ID : SA11AI.5632**  
 Amount of Each Receipt this Period 5000.00  
 Campaign Contribution

**C. Dennis Vander Molen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Green Oak Cv  
 City Clinton State MS Zip Code 39056-9749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Vermeer MidSouth, Inc. Occupation Construction equipment distributor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 17 / 2015  
**Transaction ID : SA11AI.5655**  
 Amount of Each Receipt this Period 1000.00  
 Campaign Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 22
	<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)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. Marie Vander Molen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 309 Flagstone Dr  
 City State Zip Code  
 Brandon MS 39042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Vermeer MidSouth, Inc. Construction equipment distributor  
 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  
 03 / 25 / 2015  
**Transaction ID : SA11AI.5661**  
 Amount of Each Receipt this Period  
 500.00  
 Campaign Contribution

**B. Robert Vaughn**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3234 N.W. Grand Blvd.  
 City State Zip Code  
 Oklahoma City OK 73116  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OCT Equipment, Inc. Construction equipment distributor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2015  
**Transaction ID : SA11AI.5646**  
 Amount of Each Receipt this Period  
 1000.00  
 Campaign Contribution

**C. Timothy Watters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 300 S Randolphville Rd  
 City State Zip Code  
 Piscataway NJ 08854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Hoffman Equipment Equipment Distributor  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2015  
**Transaction ID : SA11AI.5648**  
 Amount of Each Receipt this Period  
 1000.00  
 Campaign Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 22  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

**A. VERMEER EQUIPMENT OF TEXAS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3025 STATE HWY 161  
 City IRVING State TX Zip Code 75062  
 FEC ID number of contributing federal political committee. **C** C00535179  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2015  
**Transaction ID : SA11C.5641**  
 Amount of Each Receipt this Period  
 2500.00  
 Campaign Contribution

**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 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 Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Bluestone Payments**

Mailing Address 1029 Peachtree Parkway N.  
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement  
Credit card transaction fees

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
03	/	06	/	2015

**Transaction ID : SB21B.5707**

Amount of Each Disbursement this Period

163.49
--------

Full Name (Last, First, Middle Initial)

**B. Bluestone Payments**

Mailing Address 1029 Peachtree Parkway N.  
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement  
Credit card processing fees

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
03	/	06	/	2015

**Transaction ID : SB21B.5708**

Amount of Each Disbursement this Period

18.75
-------

Full Name (Last, First, Middle Initial)

**C. Bluestone Payments**

Mailing Address 1029 Peachtree Parkway N.  
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement  
Credit card processing fees

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
04	/	02	/	2015

**Transaction ID : SB21B.5709**

Amount of Each Disbursement this Period

62.67
-------

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

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

244.91
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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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Bluestone Payments**

Mailing Address 1029 Peachtree Parkway N.  
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB21B.5710**

Amount of Each Disbursement this Period

3	1	.	9	0
---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. Bluestone Payments**

Mailing Address 1029 Peachtree Parkway N.  
Suite 314

City Peachtree City State GA Zip Code 30269

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	5

**Transaction ID : SB21B.5711**

Amount of Each Disbursement this Period

2	4	.	9	0
---	---	---	---	---

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) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--

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

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

5	6	.	8	0
---	---	---	---	---

3	0	1	7	1
---	---	---	---	---



**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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BILL SHUSTER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2015

Mailing Address PO BOX 27

**Transaction ID : SB23.5681**

City State Zip Code  
HOLLIDAYSBURG PA 16648

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Campaign Contribution

Category/Type
---------------

Candidate Name

**WILLIAM MR. SHUSTER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Full Name (Last, First, Middle Initial)

**B. BILL SHUSTER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2015

Mailing Address PO BOX 27

**Transaction ID : SB23.5688**

City State Zip Code  
HOLLIDAYSBURGH PA 16648

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Campaign Contribution

Category/Type
---------------

Candidate Name

**WILLIAM MR. SHUSTER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Full Name (Last, First, Middle Initial)

**C. BYRNE FOR CONGRESS INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		15		2015

Mailing Address PO BOX 2743

**Transaction ID : SB23.5697**

City State Zip Code  
MOBILE AL 36652

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Campaign Contribution

Category/Type
---------------

Candidate Name

**BRADLEY ROBERTS BYRNE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: AL District: 01

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

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

4500.00
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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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CARLOS CURBELO CONGRESS**

Mailing Address 8770 SUNSET DRIVE #355

City MIAMI State FL Zip Code 33173

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**CARLOS MR. CURBELO**

Office Sought:  House  
 Senate  
 President  
State: FL District: 26

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 21 / 2015

**Transaction ID : SB23.5686**

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

**B. CRAMER FOR CONGRESS**

Mailing Address PO BOX 396

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**Kevin Cramer**

Office Sought:  House  
 Senate  
 President  
State: ND District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2015

**Transaction ID : SB23.5698**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. ELECT BLAKE FARENTHOLD COMMITTEE**

Mailing Address PO BOX 3369

City CORPUS CHRISTI State TX Zip Code 78463

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**RANDOLPH BLAKE FARENTHOLD**

Office Sought:  House  
 Senate  
 President  
State: TX District: 27

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2015

**Transaction ID : SB23.5692**

Amount of Each Disbursement this Period

500.00

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

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

2750.00

**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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRENCH HILL FOR ARKANSAS**

Mailing Address PO BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**French Hill**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: AR District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2015

**Transaction ID : SB23.5699**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DON BEYER**

Mailing Address 1751 POTOMAC GREENS DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Primary Debt Retirement

Candidate Name

**DONALD STERNOFF JR. BEYER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	25	/	2015

**Transaction ID : SB23.5677**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Johnson for Congress**

Mailing Address PO Box 14496

City Poland State OH Zip Code 44514

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**BILL JOHNSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	15	/	2015

**Transaction ID : SB23.5696**

Amount of Each Disbursement this Period

1000.00
---------

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

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

3000.00
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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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KATKO FOR CONGRESS**

Mailing Address 5407 ANVIL DRIVE

City CAMILLUS State NY Zip Code 13031

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**JOHN M KATKO**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 24

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	1	5

**Transaction ID : SB23.5684**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. KIRK FOR SENATE**

Mailing Address P.O. Box 8

City Winnetka State IL Zip Code 60093

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**MARK STEVEN KIRK**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 00

Date of Disbursement

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

**Transaction ID : SB23.5671**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. LOU BARLETTA FOR CONGRESS**

Mailing Address P.O. BOX 128

City HAZLETON State PA Zip Code 18201

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**LOU BARLETTA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: PA District: 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	5

**Transaction ID : SB23.5687**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PAT MEEHAN FOR CONGRESS**

Mailing Address 50 S. PROVIDENCE ROAD

City MEDIA State PA Zip Code 19063

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**PATRICK L. MR. MEEHAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: PA District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	5

**Transaction ID : SB23.5691**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
Campaign Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

**Transaction ID : SB23.5672**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. RIBBLE FOR CONGRESS**

Mailing Address PO BOX 7200

City APPLETON State WI Zip Code 54912

Purpose of Disbursement  
Campaign Contribution

Candidate Name

**REID RIBBLE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

State: WI District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	1	5

**Transaction ID : SB23.5690**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

8	5	0	0	0	0	0	0	0	0
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8	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)

**ASSOCIATED EQUIPMENT DISTRIBUTORS POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RICHARD HANNA FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	09	/	2015

Mailing Address 2308 GENESEE STREET

**Transaction ID : SB23.5689**

City State Zip Code  
UTICA NY 13502

Amount of Each Disbursement this Period

5,000.00
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Purpose of Disbursement  
Campaign Contribution

--

Candidate Name

**RICHARD HANNA**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 24

Full Name (Last, First, Middle Initial)

**B. Rob Portman for U.S. Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	12	/	2015

Mailing Address 900 19th St NW  
FI 8

**Transaction ID : SB23.5674**

City State Zip Code  
Washington DC 20006-2105

Amount of Each Disbursement this Period

5,000.00
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Purpose of Disbursement  
Campaign Contribution

--

Candidate Name

**ROB PORTMAN**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District: 00

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

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City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

10000.00
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**TOTAL** This Period (last page this line number only)..... ▶

31250.00
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