

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
Heartland Resurgence

ADDRESS (number and street) 300 M Street SE
Suite 402
 Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00544551

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day PRE-Election Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> 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:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
--	---------------------------------------	--

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

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hartley, Gregg, , ,

Type or Print Name of Treasurer

Signature of Treasurer Hartley, Gregg, , , [Electronically Filed] Date 10 / 14 / 2016

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Heartland Resurgence

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		88371.40
(b) Cash on Hand at Beginning of Reporting Period.....	157766.15	
(c) Total Receipts (from Line 19)	211040.00	402040.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	368806.15	490411.40
7. Total Disbursements (from Line 31).....	257905.00	379510.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	110901.15	110901.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Heartland Resurgence

Report Covering the Period: From:

M M / D D / Y Y Y Y Y Y
07 / 01 / 2016

To:

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

I. Receipts

**COLUMN A
Total This Period**

**COLUMN B
Calendar Year-to-Date**

	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).....	211040.00	402040.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	211040.00	402040.00
(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)	211040.00	402040.00
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)).....▶	211040.00	402040.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	211040.00	402040.00

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	44255.00	106360.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44255.00	106360.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	213650.00	273150.00
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)) ..	257905.00	379510.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	257905.00	379510.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	211040.00	402040.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	211040.00	402040.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	44255.00	106360.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44255.00	106360.25

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 14
	(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

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)
Heartland Resurgence

A. Busch, August, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Mid Rivers Mall Dr
 Suite 210
 City St. Peters State MO Zip Code 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 71000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2016
Transaction ID : SA11AI.4283
 Amount of Each Receipt this Period
 46000.00
 Memo Item

B. Cloakroom Advisors
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 M Street SE
 5th Floor
 City Washington State DC Zip Code 20003
 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 ▼
 45500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2016
Transaction ID : SA11AI.4274
 Amount of Each Receipt this Period
 6500.00
 Memo Item
 In-kind - Strategic Consulting

C. Cloakroom Advisors
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 M Street SE
 5th Floor
 City Washington State DC Zip Code 20003
 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 ▼
 52000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11AI.4275
 Amount of Each Receipt this Period
 6500.00
 Memo Item
 In-kind - Strategic Consulting

SUBTOTAL of Receipts This Page (optional).....	59000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Heartland Resurgence

A. Cloakroom Advisors

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

Mailing Address 100 M Street SE
5th Floor

City Washington State DC Zip Code 20003

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 ▼
58500.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2016

Transaction ID : SA11AI.4276

Amount of Each Receipt this Period
6500.00

Memo Item
In-kind - Strategic Consulting

B. Farber, Rudy, , ,

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

Mailing Address 100 North Wood St.

City Neosho State MO Zip Code 64850

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

Name of Employer (for Individual) Occupation (for Individual)
Community Bank and Trust Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5540.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2016

Transaction ID : SA11AI.4281

Amount of Each Receipt this Period
5540.00

Memo Item

C. Judkins, James, , ,

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

Mailing Address 1327 East Washington
Suite 126

City Harlingen State TX Zip Code 78550

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

Name of Employer (for Individual) Occupation (for Individual)
JKJ Workforce Agency President

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11AI.4288

Amount of Each Receipt this Period
10000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	22040.00
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 14
<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)
Heartland Resurgence

A. Manocherian, Jed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18 East 50th Street
 City New York State NY Zip Code 10022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Real Estate Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 70000.00

Date of Receipt 08 / 22 / 2016
Transaction ID : SA11AI.4280
 Amount of Each Receipt this Period 50000.00
 Memo Item

B. Pfautch, Roy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 52 Portland Place
 City St. Louis State MO Zip Code 63108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 75000.00

Date of Receipt 09 / 21 / 2016
Transaction ID : SA11AI.4282
 Amount of Each Receipt this Period 50000.00
 Memo Item

C. Rice, Edwin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1777 North Packer Road
 City Springfield State MO Zip Code 65803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ozarks Coca-Cola Bottling Occupation (for Individual) Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 16 / 2016
Transaction ID : SA11AI.4286
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	105000.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 14
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Heartland Resurgence

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Williams, Grant, , ,

Mailing Address 1100 North Lindbergh Boulevard

City St. Louis State MO Zip Code 63132

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 29 / 2016

Transaction ID : SA11AI.4290

Amount of Each Receipt this Period
25000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	25000.00
TOTAL This Period (last page this line number only).....▶	211040.00

**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"/> 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)
Heartland Resurgence

A. Berke, Farrah LP

Full Name (Last, First, Middle Initial)

Mailing Address 1200 New Hampshire Ave. NW
Suite 800

City Washington State DC Zip Code 20036

Purpose of Disbursement PAC Legal Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4259

Amount of Each Disbursement this Period: 590.00

Memo Item

B. Blitz, Bardgett, Deutch LP

Full Name (Last, First, Middle Initial)

Mailing Address 308 E. High St.
Suite 301

City Jefferson City State MO Zip Code 65101

Purpose of Disbursement PAC Legal Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4272

Amount of Each Disbursement this Period: 275.00

Memo Item

C. Campaign Financial Services

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement PAC Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 03 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4260

Amount of Each Disbursement this Period: 600.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1465.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Heartland Resurgence

A. Cloakroom Advisors

Full Name (Last, First, Middle Initial)

Mailing Address 100 M Street SE
5th Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4279

Amount of Each Disbursement this Period: 6500.00

Memo Item

B. Cloakroom Advisors

Full Name (Last, First, Middle Initial)

Mailing Address 100 M Street SE
5th Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4278

Amount of Each Disbursement this Period: 6500.00

Memo Item

C. Cloakroom Advisors

Full Name (Last, First, Middle Initial)

Mailing Address 100 M Street SE
5th Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement In-kind - Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 01 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4277

Amount of Each Disbursement this Period: 6500.00

Memo Item

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

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

19500.00

**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"/> 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)
Heartland Resurgence

A. Endicott Group

Full Name (Last, First, Middle Initial)

Mailing Address 209 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 29 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4265

Amount of Each Disbursement this Period: 14500.00

Memo Item

B. Majority Strategies

Full Name (Last, First, Middle Initial)

Mailing Address 12854 Kenan Drive Suite 145

City Jacksonville State FL Zip Code 32258

Purpose of Disbursement PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 07 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4266

Amount of Each Disbursement this Period: 750.00

Memo Item

C. Majority Strategies

Full Name (Last, First, Middle Initial)

Mailing Address 12854 Kenan Drive Suite 145

City Jacksonville State FL Zip Code 32258

Purpose of Disbursement PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 15 / 2016

FEC Identification Number: C

Transaction ID : SB21B.4268

Amount of Each Disbursement this Period: 7950.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	23200.00
TOTAL This Period (last page this line number only).....▶	44165.00

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Heartland Resurgence	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00544551 </div>
--	---

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

Full Name of Payee <input type="checkbox"/> Memo Item Multi Media Services	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 08 / 29 / 2016			
Mailing Address 915 King Street	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 129500.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure TV Advertising				
Name of Federal Candidate: Kander, Jason, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: MO			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016			
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 129500.00 </div>	M M / D D / Y Y Y Y Y Y 08 / 29 / 2016			

Full Name of Payee <input type="checkbox"/> Memo Item Multi Media Services	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 09 / 12 / 2016			
Mailing Address 915 King Street	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 22200.00 </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure TV Advertising				
Name of Federal Candidate: Kander, Jason, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> District: _____ <input type="checkbox"/> State: MO			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____ 2016			
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 151700.00 </div>	M M / D D / Y Y Y Y Y Y 09 / 08 / 2016			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 151700.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> _____ </div>

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

Hartley, Gregg, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
10 / 14 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Heartland Resurgence	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00544551 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Multi Media Services	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016			
Mailing Address 915 King Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">61950.00</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Advertising Category/Type 004				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Kander, Jason, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ State: <u>MO</u>	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 28 / 2016			
Calendar Year-To-Date Per Election for Office Sought 213650.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y			
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y </div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City</td> <td style="width:17%; padding: 2px;">State</td> <td style="width:50%; padding: 2px;">Zip Code</td> </tr> </table>		City	State	Zip Code
City		State	Zip Code	
Purpose of Expenditure Category/Type 				
Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ State: _____			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">61950.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">213650.00</div>

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

 Signature

 Date M M / D D / Y Y Y Y Y Y
 10 / 14 / 2016

 [Electronically Filed]