

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

The 2016 Draft 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"/>		893565.81
(b) Cash on Hand at Beginning of Reporting Period.....	40885.27	
(c) Total Receipts (from Line 19)	195494.23	3563717.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	236379.50	4457282.82
7. Total Disbursements (from Line 31).....	136816.86	4357720.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	99562.64	99562.64
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)	20047.63	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

The 2016 Draft Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 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).....	15191.16	942751.30
(ii) Unitemized	21932.99	2011773.29
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	37124.15	2954524.59
(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)	37124.15	2954524.59
12. Transfers From Affiliated/Other Party Committees.....	1000.00	1000.00
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).....	119480.73	402162.24
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	37889.35	206030.18
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))..... ▶	195494.23	3563717.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	195494.23	3563717.01

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	19651.09	2880203.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19651.09	2880203.95
22. Transfers to Affiliated/Other Party Committees.....	117065.77	1459565.77
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	100.00	17950.46
(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)).....	100.00	17950.46
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)) ..	136816.86	4357720.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	136816.86	4357720.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	37124.15	2954524.59
34. Total Contribution Refunds (from Line 28(d))	100.00	17950.46
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37024.15	2936574.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19651.09	2880203.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	119480.73	402162.24
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-99829.64	2478041.71

**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 54
	<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	

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)
The 2016 Draft Committee

A. MR. CHARLES WILLIAM BACE JR
Full Name (Last, First, Middle Initial)
Mailing Address 771 AMBER DR.
City MARCO ISLAND State FL Zip Code 34145-5703
FEC ID number of contributing federal political committee. **C**
Name of Employer ORACLE USA Occupation CONSULTANT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **500.00**

Date of Receipt **07 / 02 / 2015**
Transaction ID : SA11.141
Amount of Each Receipt this Period **50.00**
CONTRIBUTION

B. MR. MARK EDWARDS
Full Name (Last, First, Middle Initial)
Mailing Address 5551 TAFT AVE
City LA JOLLA State CA Zip Code 92037-7643
FEC ID number of contributing federal political committee. **C**
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **1050.00**

Date of Receipt **07 / 07 / 2015**
Transaction ID : SA11.129
Amount of Each Receipt this Period **150.00**
CONTRIBUTION

C. MRS. PHYLLIS FROST
Full Name (Last, First, Middle Initial)
Mailing Address 3121 LANGRIDGE AVE NW
City OLYMPIA State WA Zip Code 98502-4450
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **350.00**

Date of Receipt **07 / 07 / 2015**
Transaction ID : SA11.117
Amount of Each Receipt this Period **50.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **250.00**
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 54
	<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)
The 2016 Draft Committee

A. MR. ROBERT FUNK
Full Name (Last, First, Middle Initial)

Mailing Address 500 ELMINGTON AVE
APT 502

City NASHVILLE State TN Zip Code 37205-2525

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
206.00

Date of Receipt
07 / 07 / 2015
Transaction ID : SA11.133

Amount of Each Receipt this Period
100.00

CONTRIBUTION

B. MR. DAVID E. HANSEN
Full Name (Last, First, Middle Initial)

Mailing Address 1603 N 12TH ST

City EL CENTRO State CA Zip Code 92243-1302

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
07 / 07 / 2015
Transaction ID : SA11.126

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. MS. MARY L. RALSTON
Full Name (Last, First, Middle Initial)

Mailing Address 13355 BRAUN RD

City GOLDEN State CO Zip Code 80401-1644

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
07 / 07 / 2015
Transaction ID : SA11.132

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 8 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. MS. BRIGITTE STROEDE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 5655
 City SPRING HILL State FL Zip Code 34611-5655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 213.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2015
Transaction ID : SA11.121
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

B. MRS. NANCY WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4053 BRIARWOOD DR.
 City MARTINEZ State GA Zip Code 30907-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 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
 07 / 10 / 2015
Transaction ID : SA11.112
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. DR. MICHAEL L. ARMSTRONG
 Full Name (Last, First, Middle Initial)
 Mailing Address 7333 TANAQUA LN
 City AUSTIN State TX Zip Code 78739-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 14 / 2015
Transaction ID : SA11.85
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
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 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. MR. WILLIAM R. PITTS JR

Mailing Address 101 CENTRAL PARK W
APT 17E

City State Zip Code
NEW YORK NY 10023-4250

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2015

Transaction ID : SA11.65

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. WILLIAM D. TATE JR

Mailing Address 1050 S EUCLID AVE
UNIT 3305

City State Zip Code
ELMHURST IL 60126-5174

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2015

Transaction ID : SA11.68

Amount of Each Receipt this Period
275.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. EDWARD GASTALDO

Mailing Address P.O. BOX 30610

City State Zip Code
SANTA BARBARA CA 93130-0610

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2015

Transaction ID : SA11.56

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1025.00

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 10 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. DR. MICHAEL L. ARMSTRONG
 Full Name (Last, First, Middle Initial)
 Mailing Address 7333 TANAQUA LN
 City State Zip Code
 AUSTIN TX 78739-2035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015
Transaction ID : SA11.43
 Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

B. MRS. DIANE BROWN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1004 VIA SALVATORE
 City State Zip Code
 FLORENCE SC 29501-8966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF
 EFFORTS
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015
Transaction ID : SA11.50
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

C. MR. REX GERMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 76161 ROAD 425
 City State Zip Code
 COZAD NE 69130-5317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NEBRASKSA PLASTICS, INC CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 21 / 2015
Transaction ID : SA11.46
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 635.00
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 11 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. MR. RALPH STINSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 825 E LARAMIE LN
 City DALLAS State TX Zip Code 75217-8027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 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
 07 / 21 / 2015
Transaction ID : SA11.48
 Amount of Each Receipt this Period
 35.00
 CONTRIBUTION

B. MRS. NANCY WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4053 BRIARWOOD DR.
 City MARTINEZ State GA Zip Code 30907-2611
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFF
 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
 07 / 21 / 2015
Transaction ID : SA11.49
 Amount of Each Receipt this Period
 50.00
 CONTRIBUTION

C. MRS. SHARON K. DEWITT
 Full Name (Last, First, Middle Initial)
 Mailing Address 8670 COUNTY ROAD VV
 City LAMAR State CO Zip Code 81052-9678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DEWITT FARMING & CUSTOM SELF EMPLOYED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2015
Transaction ID : SA11.39
 Amount of Each Receipt this Period
 20.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00
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 12 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. MR. MARTIN A. KREIDT

Mailing Address 1110 PEBBLE BEACH CT

City State Zip Code
APOPKA FL 32712-2087

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

Name of Employer Occupation
RETIRED RETIRED

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
 07 / 22 / 2015
Transaction ID : SA11.36

Amount of Each Receipt this Period
20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. MARTIN SHARDA

Mailing Address 2563 SCARLET OAK DR. SE

City State Zip Code
GRAND RAPIDS MI 49512-9137

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

Name of Employer Occupation
RETIRED RET PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2015
Transaction ID : SA11.37

Amount of Each Receipt this Period
35.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. GARY WARDEN

Mailing Address 12780 ROAD 2

City State Zip Code
LIBERAL KS 67901-5354

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

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
 07 / 22 / 2015
Transaction ID : SA11.33

Amount of Each Receipt this Period
50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105.00

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 13 OF 54
	<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)
The 2016 Draft Committee

A. MS. MARGARET R. CARLSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 25369 HARPERS BRANCH DR.
 City DENTON State MD Zip Code 21629-3328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **256.76**

Date of Receipt **07 / 28 / 2015**
Transaction ID : SA11.18
 Amount of Each Receipt this Period **20.16**
CONTRIBUTION

B. MS. ALICIA KUYKENDALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1750 SOUTHVIEW DR.
 City SPARKS State NV Zip Code 89436-3660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **275.00**

Date of Receipt **07 / 28 / 2015**
Transaction ID : SA11.21
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

C. MS. MARY L. RALSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 13355 BRAUN RD
 City GOLDEN State CO Zip Code 80401-1644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **700.00**

Date of Receipt **07 / 28 / 2015**
Transaction ID : SA11.22
 Amount of Each Receipt this Period **100.00**
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	220.16
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 14 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. ROBERT W ECKLEY

Mailing Address 3030 WHITE IBIS WAY

City TALLAHASSEE State FL Zip Code 32309

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2015
Transaction ID : SA11A.2483

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. MARY L RALSTON

Mailing Address 13355 BRAUN RD.

City GOLDEN State CO Zip Code 80401

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 08 / 26 / 2015
Transaction ID : SA11A.2501

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. CHARLES W BACE, JR.

Mailing Address 771 AMBER DR.

City MARCO ISLAND State FL Zip Code 34145

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2015
Transaction ID : SA11A.2509

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00

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 15 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. JOSEPH C. BUCCIARELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SAINT JOHN ST.
 City NORWALK State CT Zip Code 06855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 09 / 2015
Transaction ID : SA11A.2524
 Amount of Each Receipt this Period
 500.00

B. CHARLES KIRCHNER
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 410
 City KANSAS State IL Zip Code 61933
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 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
 09 / 09 / 2015
Transaction ID : SA11A.2536
 Amount of Each Receipt this Period
 500.00

C. MARY L RALSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 13355 BRAUN RD.
 City GOLDEN State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 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
 09 / 09 / 2015
Transaction ID : SA11A.2535
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
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 16 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. ROBERT W ECKLEY

Mailing Address 3030 WHITE IBIS WAY

City State Zip Code
TALLAHASSEE FL 32309

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : SA11A.2557

Amount of Each Receipt this Period
1000.00

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

Mailing Address 4053 BRIARWOOD DR.

City State Zip Code
MARTINEZ GA 30907

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : SA11A.2556

Amount of Each Receipt this Period
50.00

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

Mailing Address 2219 NORTHWOOD DRIVE

City State Zip Code
SEMINOLE OK 74868

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 09 / 21 / 2015
Transaction ID : SA11A.2572

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1350.00

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 17 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. NANCY WILLIAMS
 Mailing Address 4053 BRIARWOOD DR.
 City State Zip Code
 MARTINEZ GA 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 21 / 2015
Transaction ID : SA11A.2562
 Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. MICHAEL L. ARMSTRONG
 Mailing Address 7333 TANAQUE LANE
 City State Zip Code
 AUSTIN TX 78739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 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
 09 / 24 / 2015
Transaction ID : SA11A.2590
 Amount of Each Receipt this Period
 100.00

Full Name (Last, First, Middle Initial)
C. ANTHONY J. ESPINOZA
 Mailing Address P.O. BOX 1415
 City State Zip Code
 LA MIRADA CA 90637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2015
Transaction ID : SA11A.2601
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 18 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. MEDICAL BILLING ASSOCIATES

Mailing Address **887 WYOMING AVE**

City **WYOMING** State **PA** Zip Code **18644**

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

Name of Employer **MEDICAL BILLING ASSOC.** Occupation **MEDICAL BILLING**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
09 / 24 / 2015
Transaction ID : SA11A.2522

Amount of Each Receipt this Period
250.00

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

Mailing Address **3087 TAPER AVENUE**

City **SANTA CLARA** State **CA** Zip Code **95051**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.00**

Date of Receipt
09 / 29 / 2015
Transaction ID : SA11A.2609

Amount of Each Receipt this Period
201.00

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

Mailing Address **629 PRINCE ST. SE**

City **GRAND RAPIDS** State **MI** Zip Code **49507**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
10 / 02 / 2015
Transaction ID : SA11A.2618

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **601.00**

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 19 OF 54
	<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)
The 2016 Draft Committee

A. MICHAEL L. ARMSTRONG
 Full Name (Last, First, Middle Initial)
 Mailing Address 7333 TANAQUE LANE
 City AUSTIN State TX Zip Code 78739
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : SA11A.2775
 Amount of Each Receipt this Period
 100.00

B. CHARLES W BACE, JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 771 AMBER DR.
 City MARCO ISLAND State FL Zip Code 34145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : SA11A.2757
 Amount of Each Receipt this Period
 50.00

C. RICHARD FRANCESCHINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4166 MERCER RD.
 City BULLHEAD CITY State AZ Zip Code 86429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : SA11A.2768
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 20 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. NANCY WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4053 BRIARWOOD DR.
 City MARTINEZ State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : SA11A.2765
 Amount of Each Receipt this Period
 50.00

B. NANCY WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4053 BRIARWOOD DR.
 City MARTINEZ State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2015
Transaction ID : SA11A.2770
 Amount of Each Receipt this Period
 50.00

C. MARK S EDWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5551 TAFT AVE.
 City LA JOLLA State CA Zip Code 92037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2015
Transaction ID : SA11A.2646
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
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 21 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
The 2016 Draft Committee

A. GREGORY E. POLITO
 Full Name (Last, First, Middle Initial)
 Mailing Address 12345 AVALON ROAD
 City WHITTIER State CA Zip Code 90601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PIH HEALTH Occupation DOCTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015
Transaction ID : SA11A.2615
 Amount of Each Receipt this Period
 500.00

B. HARRY F. REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 2915 SE TIMBERLINE DRIVE
 City WAUKEE State IA Zip Code 50263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BED EXPANDER Occupation CIRCEL R. TRUCK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015
Transaction ID : SA11A.2613
 Amount of Each Receipt this Period
 500.00

C. HARRY F. REED
 Full Name (Last, First, Middle Initial)
 Mailing Address 2915 SE TIMBERLINE DRIVE
 City WAUKEE State IA Zip Code 50263
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BED EXPANDER Occupation CIRCEL R. TRUCK
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2015
Transaction ID : SA11A.2614
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 22 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. ROBERT W ECKLEY

Mailing Address 3030 WHITE IBIS WAY

City State Zip Code
TALLAHASSEE FL 32309

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2015
Transaction ID : SA11A.2733

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
B. MARK S EDWARDS

Mailing Address 5551 TAFT AVE.

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2015
Transaction ID : SA11A.2727

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. DAVID E. HANSEN

Mailing Address 1603 N. 12TH ST.

City State Zip Code
EL CENTRO CA 92243

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 10 / 26 / 2015
Transaction ID : SA11A.2725

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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 23 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. MARY L RALSTON

Mailing Address 13355 BRAUN RD.

City State Zip Code
GOLDEN CO 80401

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 10 / 26 / 2015
Transaction ID : SA11A.2753

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
B. OUIDA A SHELTON

Mailing Address 1906 FAIRWAY CIRCLE DRIVE

City State Zip Code
SAN MARCOS CA 92078

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2015
Transaction ID : SA11A.2706

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. ELIZABETH R. SUMMERS

Mailing Address 7501 E THOMPSON PEAK PARKWAY UNIT

City State Zip Code
SCOTTSDALE AZ 85255

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

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
 10 / 26 / 2015
Transaction ID : SA11A.2734

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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 24 OF 54
	<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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. NANCY WILLIAMS

Mailing Address 4053 BRIARWOOD DR.

City MARTINEZ	State GA	Zip Code 30907
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2015
Transaction ID : SA11A.2732

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. CHARLES W BACE, JR.

Mailing Address 771 AMBER DR.

City MARCO ISLAND	State FL	Zip Code 34145
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015
Transaction ID : SA11A.2794

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MARK S EDWARDS

Mailing Address 5551 TAFT AVE.

City LA JOLLA	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2015
Transaction ID : SA11A.2795

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 25 OF 54
	<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)
The 2016 Draft Committee

A. MICHAEL L. ARMSTRONG
Full Name (Last, First, Middle Initial)

Mailing Address 7333 TANAQUE LANE

City AUSTIN State TX Zip Code 78739

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 09 / 2015
Transaction ID : SA11A.2797

Amount of Each Receipt this Period
200.00

B. ROBERT W ECKLEY
Full Name (Last, First, Middle Initial)

Mailing Address 3030 WHITE IBIS WAY

City TALLAHASSEE State FL Zip Code 32309

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
11 / 09 / 2015
Transaction ID : SA11A.2816

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2402 SW BROOKFIELD ST.

City TOPEKA State KS Zip Code 66614

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 09 / 2015
Transaction ID : SA11A.2828

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	1450.00
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 26 OF 54
	<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	

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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial) A. ROGER WAHL DICK		Date of Receipt
Mailing Address 10643 CAVALLO RDG		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City	State	Zip Code
EDEN PRAIRIE	MN	55347
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	
		Transaction ID : SA11A.2812
		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>

Full Name (Last, First, Middle Initial) B. MARY L RALSTON		Date of Receipt
Mailing Address 13355 BRAUN RD.		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>
City	State	Zip Code
GOLDEN	CO	80401
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Transaction ID : SA11A.2838
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

Full Name (Last, First, Middle Initial) C. MICHAEL L. ARMSTRONG		Date of Receipt
Mailing Address 7333 TANAQUE LANE		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2015"/>
City	State	Zip Code
AUSTIN	TX	78739
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
INFORMATION REQUESTED	INFORMATION REQUESTED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	
		Transaction ID : SA11A.2875
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 27 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. JOSEPH C. BUCCIARELLI
 Full Name (Last, First, Middle Initial)
 Mailing Address 16 SAINT JOHN ST.
 City NORWALK State CT Zip Code 06855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015
Transaction ID : SA11A.2859
 Amount of Each Receipt this Period
 200.00

B. RICHARD FRANCESCHINI
 Full Name (Last, First, Middle Initial)
 Mailing Address 4166 MERCER RD.
 City BULLHEAD CITY State AZ Zip Code 86429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015
Transaction ID : SA11A.2861
 Amount of Each Receipt this Period
 100.00

C. DAVID E. HANSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1603 N. 12TH ST.
 City EL CENTRO State CA Zip Code 92243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 28 / 2015
Transaction ID : SA11A.2864
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00
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 28 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. NANCY WILLIAMS

Mailing Address 4053 BRIARWOOD DR.

City State Zip Code
MARTINEZ GA 30907

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2015
Transaction ID : SA11A.2860

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. W.L. TVEIT

Mailing Address 610 HAZEN BAY RD.

City State Zip Code
HAZEN ND 58545

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 30 / 2015
Transaction ID : SA11A.2845

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. CHARLES W BACE, JR.

Mailing Address 771 AMBER DR.

City State Zip Code
MARCO ISLAND FL 34145

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2015
Transaction ID : SA11A.2880

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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 29 OF 54
	<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)
The 2016 Draft Committee

A. DAVID E. HANSEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1603 N. 12TH ST.
 City EL CENTRO State CA Zip Code 92243
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015
Transaction ID : SA11A.2885
 Amount of Each Receipt this Period
 100.00

B. NANCY WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 4053 BRIARWOOD DR.
 City MARTINEZ State GA Zip Code 30907
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 09 / 2015
Transaction ID : SA11A.2887
 Amount of Each Receipt this Period
 50.00

C. MARY L RALSTON
 Full Name (Last, First, Middle Initial)
 Mailing Address 13355 BRAUN RD.
 City GOLDEN State CO Zip Code 80401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 INFORMATION REQUESTED INFORMATION REQUESTED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 14 / 2015
Transaction ID : SA11A.2891
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 30 OF 54
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. VIRGINIA PROCTOR

Mailing Address **629 PRINCE ST. SE**

City State Zip Code
GRAND RAPIDS MI 49507

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 18 / 2015

Transaction ID : SA11A.2913

Amount of Each Receipt this Period
200.00

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

Mailing Address **4166 MERCER RD.**

City State Zip Code
BULLHEAD CITY AZ 86429

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 23 / 2015

Transaction ID : SA11A.2917

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. CHARLES W BACE, JR.

Mailing Address **771 AMBER DR.**

City State Zip Code
MARCO ISLAND FL 34145

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11A.2923

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **350.00**

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 31 OF 54
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. MARK S EDWARDS

Mailing Address 5551 TAFT AVE.

City LA JOLLA	State CA	Zip Code 92037
------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12	/	31	/	2015

Transaction ID : SA11A.2924

Amount of Each Receipt this Period
150.00

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

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

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

Mailing Address

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

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

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	15191.16

**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 32 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial) A. The 2016 Committee		Date of Receipt MM / DD / YYYY 09 / 08 / 2015
Mailing Address 370 Maple Avenue W Suite 4		Transaction ID : 1
City Vienna State VA Zip Code 22180-5615	FEC ID number of contributing federal political committee. C C00569905	Amount of Each Receipt this Period 1000.00
Name of Employer Occupation	Aggregate Year-to-Date ▼	TRANSFER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	TRANSFER

Full Name (Last, First, Middle Initial) B.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Aggregate Year-to-Date ▼	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)
A. ADVANCED RESPONSE SYSTEMS

Mailing Address 13175 GEORGE WEBER DRIVE

City State Zip Code
ROGERS MN 55374-8900

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55300.00

Date of Receipt
08 / 18 / 2015
Transaction ID : SA15.2460

Amount of Each Receipt this Period
55300.00

POSTAGE REFUND

POSTAGE REFUND

Full Name (Last, First, Middle Initial)
B. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City State Zip Code
STERLING VA 20166-9211

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29765.77

Date of Receipt
08 / 18 / 2015
Transaction ID : SA15.2461

Amount of Each Receipt this Period
23600.77

POSTAGE REFUND

POSTAGE REFUND

Full Name (Last, First, Middle Initial)
C. MDI IMAGING & MAIL

Mailing Address 21955 CASCADES PARKWAY

City State Zip Code
STERLING VA 20166-9211

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29765.77

Date of Receipt
08 / 31 / 2015
Transaction ID : SA15.2462

Amount of Each Receipt this Period
6165.00

POSTAGE REFUND

POSTAGE REFUND

SUBTOTAL of Receipts This Page (optional)..... ▶ 85065.77

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 34 OF 54
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. SISK FULFILLMENT SERVICES
 Full Name (Last, First, Middle Initial)
 Mailing Address 1900 INDUSTRIAL PARK ROAD
 City FEDERALSBURG State MD Zip Code 21632-2667
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 32000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015
Transaction ID : SA15.2465
 Amount of Each Receipt this Period
 32000.00
 POSTAGE REFUND
 POSTAGE REFUND

B. RST MARKETING
 Full Name (Last, First, Middle Initial)
 Mailing Address 1272 CORPORATE PARK ROAD
 City NEW CASTLE State VA Zip Code 24127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2414.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2015
Transaction ID : SA15.2466
 Amount of Each Receipt this Period
 2414.96
 POSTAGE REFUND
 POSTAGE REFUND

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

SUBTOTAL of Receipts This Page (optional).....▶	34414.96
TOTAL This Period (last page this line number only).....▶	119480.73

**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 35 OF 54
<input 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 checked="" 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial) A. OMEGA LIST		Date of Receipt
Mailing Address 1420 SPRING HILL ROAD SUITE 490		<input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City MC LEAN	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.2457
Name of Employer		Amount of Each Receipt this Period <input type="text" value="15939.99"/>
Occupation		LIST RENTAL INCOME
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="204224.30"/>	LIST RENTAL INCOME

Full Name (Last, First, Middle Initial) B. OMEGA LIST		Date of Receipt
Mailing Address 1420 SPRING HILL ROAD SUITE 490		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City MC LEAN	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.2458
Name of Employer		Amount of Each Receipt this Period <input type="text" value="9493.19"/>
Occupation		LIST RENTAL INCOME
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="204224.30"/>	LIST RENTAL INCOME

Full Name (Last, First, Middle Initial) C. OMEGA LIST		Date of Receipt
Mailing Address 1420 SPRING HILL ROAD SUITE 490		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City MC LEAN	State VA	Zip Code 22102-3028
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA17.2459
Name of Employer		Amount of Each Receipt this Period <input type="text" value="9820.64"/>
Occupation		LIST RENTAL INCOME
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="204224.30"/>	LIST RENTAL INCOME

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="35253.82"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 36 OF 54
(check only one)

<input 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 checked="" 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)
The 2016 Draft Committee

A. EISENHOWER FOUNDATION
Full Name (Last, First, Middle Initial)
Mailing Address 1420 CHAIN BRIDGE RD #490
City MCLEAN State VA Zip Code 22101
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2625.94

Date of Receipt 10 / 28 / 2015
Transaction ID : SA17.2516
Amount of Each Receipt this Period 2625.94
EXCESS INVENTORY SALE
SALE OF EXCESS INVENTORY

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
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
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	2625.94
TOTAL This Period (last page this line number only).....▶	37879.76

**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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2925

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
PRINTING - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I1338

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
PRINTING - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I1344

Amount of Each Disbursement this Period

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
PRINTING - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : SB21B.I1346

Amount of Each Disbursement this Period

2278.03

Full Name (Last, First, Middle Initial)

B. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City FEDERALSBURG State MD Zip Code 21632-2667

Purpose of Disbursement
STORAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 06 / 2015

Transaction ID : SB21B.I858

Amount of Each Disbursement this Period

135.00

Full Name (Last, First, Middle Initial)

C. SAM'S CLUB

Mailing Address 2101 S.E. 25TH STREET

City BENTONVILLE State AR Zip Code 72712

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2015

Transaction ID : SB21B.I2926

Amount of Each Disbursement this Period

23.26

OFFICE SUPPLIES

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

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

2436.29

**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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2927

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

B. WENDY'S

Mailing Address 4288 W DUBLIN GRANVILLE RD

City DUBLIN State OH Zip Code 43017

Purpose of Disbursement
FOOD/BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2928

Amount of Each Disbursement this Period

MEALS

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I1460

Amount of Each Disbursement this Period

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2929

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2930

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2931

Amount of Each Disbursement this Period

POSTAGE

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2932

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
POSTAGE - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2442

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City FEDERALSBURG State MD Zip Code 21632-2667

Purpose of Disbursement
POSTAGE - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2441

Amount of Each Disbursement this Period

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City State Zip Code
FEDERLSBURG MD 21632-2667

Purpose of Disbursement
MAILHOUSE FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2443

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151-1501

Purpose of Disbursement
BOOKKEEPING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2440

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City State Zip Code
WINSTON SALEM NC 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2933

Amount of Each Disbursement this Period

POSTAGE

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
08 / 12 / 2015

Transaction ID : SB21B.I2934

Amount of Each Disbursement this Period
100.00

POSTAGE

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
08 / 13 / 2015

Transaction ID : SB21B.I2935

Amount of Each Disbursement this Period
400.00

POSTAGE

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement
MM / DD / YYYY
08 / 18 / 2015

Transaction ID : SB21B.I2936

Amount of Each Disbursement this Period
300.00

POSTAGE

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

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

800.00

**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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.I2938**

Amount of Each Disbursement this Period

POSTAGE

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 3171 PETERS CREEK PARKWAY

City WINSTON SALEM State NC Zip Code 27127-4713

Purpose of Disbursement
BANK CHARGES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.I2937**

Amount of Each Disbursement this Period

BANK CHARGES

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 3320 SILAS CREEK PARKWAY
SUITE 500

City WINSTON SALEM State NC Zip Code 27103-3031

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB21B.I2940**

Amount of Each Disbursement this Period

POSTAGE

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. WELLS FARGO BANK

Mailing Address 3171 PETERS CREEK PARKWAY

City WINSTON SALEM State NC Zip Code 27127-4713

Purpose of Disbursement
BANK CHARGES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.I2939**

Amount of Each Disbursement this Period

BANK CHARGES

Full Name (Last, First, Middle Initial)

B. DELUXE BUSINESS CHECKS & SOLUTIONS

Mailing Address PO BOX 742572

City CINCINNATI State OH Zip Code 45274-2572

Purpose of Disbursement
OFFICE SUPPLIES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.I2515**

Amount of Each Disbursement this Period

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

C. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD
SUITE 490

City MC LEAN State VA Zip Code 22102-3028

Purpose of Disbursement
AGENCY FEE - CONSULTANT

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : **SB21B.I2446**

Amount of Each Disbursement this Period

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGES

004

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.I2449

Amount of Each Disbursement this Period

252.66

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
POSTAGE - FULFILLMENT

004

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.I2445

Amount of Each Disbursement this Period

37.73

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
MAILHOUSE - FULFILLMENT

004

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2015

Transaction ID : SB21B.I2447

Amount of Each Disbursement this Period

1283.84

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

1574.23

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City State Zip Code
FEDERALSBURG MD 21632-2667

Purpose of Disbursement
MAILHOUSE FULFILLMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

Transaction ID : **SB21B.I2448**

Amount of Each Disbursement this Period

1768.91

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City State Zip Code
CHANTILLY VA 20151-1501

Purpose of Disbursement
BOOKKEEPING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	31	/	2015

Transaction ID : **SB21B.I2444**

Amount of Each Disbursement this Period

1080.20

Full Name (Last, First, Middle Initial)

C. WELLS FARGO BANK

Mailing Address 3171 PETERS CREEK PARKWAY

City State Zip Code
WINSTON SALEM NC 27127-4713

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2015

Transaction ID : **SB21B.I2611**

Amount of Each Disbursement this Period

24.00

BANK CHARGES

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

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

2873.11

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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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City State Zip Code
FEDERLSBURG MD 21632-2667

Purpose of Disbursement
POSTAGE - FULFILLMENT

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 28 / 2015

Transaction ID : SB21B.I2450

Amount of Each Disbursement this Period

290.98

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code
FAIRFAX VA 22030-6051

Purpose of Disbursement
BANK CHARGES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 30 / 2015

Transaction ID : SB21B.I2451

Amount of Each Disbursement this Period

119.03

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code
FAIRFAX VA 22030-6051

Purpose of Disbursement
BANK CHARGES

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2015

Transaction ID : SB21B.I2452

Amount of Each Disbursement this Period

9.09

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

419.10

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City FAIRFAX State VA Zip Code 22030-6051

Purpose of Disbursement
BANK CHARGES

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B.I2456

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
POSTAGE - FULFILLMENT

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B.I2453

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. INTERNATIONAL DATA MANAGEMENT, INC.

Mailing Address 490 WHITE POND DRIVE

City AKRON State OH Zip Code 44320-1122

Purpose of Disbursement
MAILHOUSE - FULFILLMENT

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

Transaction ID : SB21B.I2454

Amount of Each Disbursement this Period

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

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"/> 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. SISK FULFILLMENT SERVICES

Mailing Address 1900 INDUSTRIAL PARK ROAD

City State Zip Code
FEDERALSBURG MD 21632-2667

Purpose of Disbursement
MAILHOUSE - FULFILLMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2455

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. WELLS FARGO BANK

Mailing Address 3171 PETERS CREEK PARKWAY

City State Zip Code
WINSTON SALEM NC 27127-4713

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2784

Amount of Each Disbursement this Period

BANK CHARGES

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS ROAD

City State Zip Code
FAIRFAX VA 22030-6051

Purpose of Disbursement
BANK CHARGES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

004
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I2468

Amount of Each Disbursement this Period

BANK CHARGES

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" 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)
The 2016 Draft Committee

Full Name (Last, First, Middle Initial)

A. THE 2016 COMMITTEE

Mailing Address 370 MAPLE AVENUE W
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB22.I2463

Amount of Each Disbursement this Period

TRANSFER

Full Name (Last, First, Middle Initial)

B. THE 2016 COMMITTEE

Mailing Address 370 MAPLE AVENUE W
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB22.I2464

Amount of Each Disbursement this Period

TRANSFER

Full Name (Last, First, Middle Initial)

C. THE 2016 COMMITTEE

Mailing Address 370 MAPLE AVENUE W
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement
TRANSFER

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB22.I2467

Amount of Each Disbursement this Period

TRANSFER

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 52 OF 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): agency fees/postage
Mailing Address 1420 Spring Hill Road Suite 490	
City State Zip Code McLean VA 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="16348.25"/>	Transaction ID : D87800163983E48	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16348.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Campaign Funding Direct	Nature of Debt (Purpose): Agency Fee
Mailing Address 1420 Spring Hill Road Suite 490	
City State Zip Code McLean VA 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="2594.85"/>	Transaction ID : D03C43F86D6A741	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2594.85"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG Data Center	Nature of Debt (Purpose): Computer - List Maintenance
Mailing Address 1420 Spring Hill Rd. Suite 490	
City State Zip Code McLean VA 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="1104.53"/>	Transaction ID : D5D21D49D33F343	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1104.53"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="20047.63"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 53 OF 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor International Data Management, Inc.	Nature of Debt (Purpose): Mailhouse & Postage - Fulfillment Items
Mailing Address 490 White Pond Drive	
City State Zip Code Akron OH 44320-1122	

Outstanding Balance Beginning This Period <input type="text" value="80.00"/>	Transaction ID : D26E58674B5B04F	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="80.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor International Data Management, Inc.	Nature of Debt (Purpose): Printing - Fulfillment
Mailing Address 490 White Pond Drive	
City State Zip Code Akron OH 44320-1122	

Outstanding Balance Beginning This Period <input type="text" value="40.00"/>	Transaction ID : D42236824A0394E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="40.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor International Data Management, Inc.	Nature of Debt (Purpose): Printing - Fulfillment
Mailing Address 490 White Pond Drive	
City State Zip Code Akron OH 44320-1122	

Outstanding Balance Beginning This Period <input type="text" value="2278.03"/>	Transaction ID : D4085361772A64E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2278.03"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 54 OF 54
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
The 2016 Draft Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor International Data Management, Inc.	Nature of Debt (Purpose): Printing - Fulfillment
Mailing Address 490 White Pond Drive	
City State Zip Code Akron OH 44320-1122	

Outstanding Balance Beginning This Period <input type="text" value="659.52"/>	Transaction ID : DBE6680F1F00446	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="659.52"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sisk Fulfillment Services	Nature of Debt (Purpose): Storage
Mailing Address 1900 Industrial Park Road	
City State Zip Code Federalsburg MD 21632-2667	

Outstanding Balance Beginning This Period <input type="text" value="135.00"/>	Transaction ID : D71841FA4AFD649	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="135.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="20047.63"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="20047.63"/>