

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)

ADDRESS (number and street) 499 SOUTH CAPITOL ST SW SUITE 422

Check if different than previously reported. (ACC) WASHINGTON DC 20003

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

C C00399196

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

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] / [DD] / [YYYY] 06 / 01 / 2016 through [MM] / [DD] / [YYYY] 06 / 30 / 2016

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

Type or Print Name of Treasurer John Clyburn

Signature of Treasurer John Clyburn [Electronically Filed] Date 07 / 20 / 2016

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

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

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		468957.74
(b) Cash on Hand at Beginning of Reporting Period.....	699709.82	
(c) Total Receipts (from Line 19) .....	68000.00	460185.80
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	767709.82	929143.54
7. Total Disbursements (from Line 31).....	188676.28	350110.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	579033.54	579033.54
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	30458.32	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	5000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	5000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	68000.00	455185.80
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	68000.00	460185.80
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	68000.00	460185.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	68000.00	460185.80

**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 .....	41176.28	92110.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	41176.28	92110.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	147500.00	258000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	188676.28	350110.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	188676.28	350110.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	68000.00	460185.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	68000.00	460185.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	41176.28	92110.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	41176.28	92110.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
<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

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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A. ALTRIA GROUP, INC. PAC**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 CONSTITUTION AVENUE NW #400W

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : SA11C.5096**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. AMERICAN EXPRESS POLITICAL ACTION COMMITTEE**  
Full Name (Last, First, Middle Initial)

Mailing Address 801 PENNSYLVANIA AVENUE NW #650

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00040535

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : SA11C.5097**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. AMGEN INC. PAC**  
Full Name (Last, First, Middle Initial)

Mailing Address 601 13TH STREET NW 12TH FLOOR

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : SA11C.5098**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
<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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A. CHICAGO BOARD OPTIONS EXCHANGE PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 S. LASALLE STREET  
 City CHICAGO State IL Zip Code 60605  
 FEC ID number of contributing federal political committee. **C** C00100693  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 22 / 2016  
**Transaction ID : SA11C.5106**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. ELI LILLY AND COMPANY PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address LILLY CORPORATE CENTER  
 City INDIANAPOLIS State IN Zip Code 46285  
 FEC ID number of contributing federal political committee. **C** C00082792  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2016  
**Transaction ID : SA11C.5110**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. FLUOR CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6700 LAS COLINAS BLVD.  
 City IRVING State TX Zip Code 75039  
 FEC ID number of contributing federal political committee. **C** C00034132  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 08 / 2016  
**Transaction ID : SA11C.5099**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
<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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A. HEWLETT PACKARD ENTERPRISE COMPANY PAC (HPE PAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 709 G STREET, NW SUITE 300  
 City WASHINGTON State DC Zip Code 20001  
 FEC ID number of contributing federal political committee. **C** C00196725  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : SA11C.5101**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1771 N STREET NW  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2016  
**Transaction ID : SA11C.5102**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3601 VINCENNES ROAD  
 City INDIANAPOLIS State IN Zip Code 46268  
 FEC ID number of contributing federal political committee. **C** C00170258  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.5108**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 34
<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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A. PINNACLE WEST CAPITAL CORPORATION PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 801 PENNSYLVANIA AVENUE NW #214  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00015933  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.5109**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 MASSACHUSETTS AVENUE NE, 1ST F  
 City WASHINGTON State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00343137  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.5104**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**C. REYNOLDS AMERICAN INC. POLITICAL ACTION COMMITTEE; RAI PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 718  
 City WINSTON-SALEM State NC Zip Code 27102  
 FEC ID number of contributing federal political committee. **C** C00042002  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2016  
**Transaction ID : SA11C.5113**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
<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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A.** Full Name (Last, First, Middle Initial)  
SEIU COPE (SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION)

Mailing Address 1800 MASSACHUSETTS AVE NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	22	/	2016

**Transaction ID : SA11C.5114**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
U.S. BANCORP POLITICAL PARTICIPATION PROGRAM

Mailing Address 950 F STREET NW SUITE 750

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee. **C** C00018036

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2016

**Transaction ID : SA11C.5111**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address 8000 EAST JEFFERSON

City	State	Zip Code
DETROIT	MI	48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer	Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	08	/	2016

**Transaction ID : SA11C.5103**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 11 OF 34  
(check only one)

<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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

**A.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)**

Mailing Address 1300 I STREET NW NW SUITE 400W

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 22 / 2016

**Transaction ID : SA11C.5115**

Amount of Each Receipt this Period  
3000.00

Memo Item

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

Mailing Address

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

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	68000.00

**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)

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. Angerholzer Broz Consulting LLC**

Mailing Address 499 S. Capitol Street SW #422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

**Transaction ID : SB21B.5000**

Amount of Each Disbursement this Period

6000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting LLC**

Mailing Address 499 S. Capitol Street SW #422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Office Internet

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

**Transaction ID : SB21B.5001**

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Angerholzer Broz Consulting LLC**

Mailing Address 499 S. Capitol Street SW #422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

**Transaction ID : SB21B.5003**

Amount of Each Disbursement this Period

1035.90

Memo Item

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

7060.90

**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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. Hyatt Place Charleston**

Mailing Address 560 King Street

City Charleston State SC Zip Code 29403

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.5003.1**

Amount of Each Disbursement this Period

450.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. Angerholzer Broz Consulting LLC**

Mailing Address 499 S. Capitol Street SW #422

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.5006**

Amount of Each Disbursement this Period

341.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. U.S. Postal Service**

Mailing Address 600 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.5006.1**

Amount of Each Disbursement this Period

192.81

Memo Item

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

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

341.65

**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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)  
**A. Angerholzer Broz Consulting LLC**

Mailing Address 499 S. Capitol Street SW #422

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.5013**

Amount of Each Disbursement this Period: 6000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Bank of America**

Mailing Address 201 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Credit Card Processing Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 01 / 2016

Transaction ID : **SB21B.5014**

Amount of Each Disbursement this Period: 37.45

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Bank of America**

Mailing Address 201 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.4990**

Amount of Each Disbursement this Period: 23.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6060.45

**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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 201 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 15 / 2016

Transaction ID : **SB21B.5015**

Amount of Each Disbursement this Period

166.07

Memo Item

Full Name (Last, First, Middle Initial)

**B. Bank of America**

Mailing Address 201 Pennsylvania Avenue SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Banking Supplies

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2016

Transaction ID : **SB21B.5016**

Amount of Each Disbursement this Period

92.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Branding Bliss**

Mailing Address 53 Jane Jacobs Street

City Mount Pleasant State SC Zip Code 29464

Purpose of Disbursement  
Gift Bags for Event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 08 / 2016

Transaction ID : **SB21B.4994**

Amount of Each Disbursement this Period

4999.46

Memo Item

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

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

5257.53

**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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial) <b>A. Cannon Green Charleston</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2016
Mailing Address 103 Spring Street		<b>Transaction ID : SB21B.5002</b>
City Charleston	State SC	
Purpose of Disbursement Catering	Candidate Name	Amount of Each Disbursement this Period 21179.17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. John Clyburn</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2016
Mailing Address 499 S. Capitol Street SW Suite 422		<b>Transaction ID : SB21B.4989</b>
City Washington	State DC	
Purpose of Disbursement Travel Expenses	Candidate Name	Amount of Each Disbursement this Period 551.58
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Charleston Place</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2016
Mailing Address 205 Meeting Place		<b>Transaction ID : SB21B.4989.0</b>
City Charleston	State SC	
Purpose of Disbursement Travel Expenses	Candidate Name	Amount of Each Disbursement this Period 551.58
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21730.75
<b>TOTAL</b> 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)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. Images Photography**

Mailing Address P.O. Box 70832

City Charleston State SC Zip Code 29415

Purpose of Disbursement  
Photography

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 Y
06	/	07	/	2016

Transaction ID : SB21B.4993

Amount of Each Disbursement this Period

575.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

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Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

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Memo Item

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

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

575.00
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41026.28
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. AMI BERA FOR CONGRESS**

Mailing Address PO BOX 582496

City ELK GROVE State CA Zip Code 95758

Purpose of Disbursement  
Contribution

Candidate Name

**AMERISH BERA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 07

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5076**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANGIE CRAIG FOR CONGRESS**

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement  
Contribution

Candidate Name

**ANGELA DAWN CRAIG**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MN District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5094**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANTHONY BROWN FOR CONGRESS**

Mailing Address 12138 CENTRAL AVE #671

City BOWIE State MD Zip Code 20721

Purpose of Disbursement  
Contribution - Primary Debt Retirement

Candidate Name

**ANTHONY GREGORY BROWN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2016

**Transaction ID : SB23.5019**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

10000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. CAIN FOR CONGRESS**

Mailing Address PO BOX 1523

City BANGOR State ME Zip Code 04402

Purpose of Disbursement Contribution

Candidate Name  
**EMILY CAIN**

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

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5093**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAROL SHEA-PORTER FOR CONGRESS**

Mailing Address P.O. BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement Contribution

Candidate Name  
**CAROL SHEA-PORTER**

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

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5023**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHARLIE CRIST FOR CONGRESS**

Mailing Address PO BOX 1547

City ST. PETERSBURG State FL Zip Code 33731

Purpose of Disbursement Contribution

Candidate Name  
**CHARLIE JOSEPH CRIST**

Office Sought:  House  Senate  President  
State: FL District: 13

Disbursement For: 2016  
 Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5037**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. COLLEEN DEACON FOR CONGRESS**

Mailing Address 118 JULIAN PL  
#208

City SYRACUSE State NY Zip Code 13210

Purpose of Disbursement  
Contribution

Candidate Name

**COLLEEN DEACON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 24

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5031**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CROWLEY FOR CONGRESS**

Mailing Address 84-56 GRAND AVENUE

City ELMHURST State NY Zip Code 11373

Purpose of Disbursement  
Contribution

Candidate Name

**JOSEPH CROWLEY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NY District: 14

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5080**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS**

Mailing Address 1071 TWIN BRANCH LN

City WESTON State FL Zip Code 33326

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 23

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5069**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. DONALD NORCROSS FOR CONGRESS**

Mailing Address PO BOX 160

City COLLINGSWOOD State NJ Zip Code 08108

Purpose of Disbursement  
Contribution - Primary Debt Retirement

Candidate Name  
**DONALD W NORCROSS**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: NJ District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5073**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DR. RAUL RUIZ FOR CONGRESS**

Mailing Address PO BOX 3433

City PALM DESERT State CA Zip Code 92261

Purpose of Disbursement  
Contribution

Candidate Name  
**RAUL RUIZ**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CA District: 36

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5078**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DWIGHT EVANS FOR CONGRESS**

Mailing Address PO BOX 6578

City PHILADELPHIA State PA Zip Code 19138

Purpose of Disbursement  
Contribution

Candidate Name  
**DWIGHT EVANS**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: PA District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5027**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. EGGMAN FOR CONGRESS**

Mailing Address 3220 WEST MONTE VISTA BOULEVARD  
#169

City TURLOCK State CA Zip Code 95380

Purpose of Disbursement  
Contribution

Candidate Name  
**MICHAEL RAY EGGMAN**

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
State: CA District: 10

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5062**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ANNA THRONE-HOLST**

Mailing Address PO BOX 6

City SOUTHAMPTON State NY Zip Code 11969

Purpose of Disbursement  
Contribution

Candidate Name  
**ANNA THRONE-HOLST**

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
State: NY District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5056**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JOHN PLUMB**

Mailing Address PO BOX 2016

City JAMESTOWN State NY Zip Code 14702

Purpose of Disbursement  
Contribution

Candidate Name  
**JOHN PLUMB**

Office Sought:  House  Senate  President  
Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼  
State: NY District: 23

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5059**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF PATRICK MURPHY**

Mailing Address 4521 PGA BLVD #412

City State Zip Code  
PALM BEACH GARDENS FL 33418

Purpose of Disbursement  
Contribution

Candidate Name  
**PATRICK E MURPHY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: FL District: 00

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5022**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF RAJA FOR CONGRESS**

Mailing Address PO BOX 681202

City State Zip Code  
SCHAUMBURG IL 60168

Purpose of Disbursement  
Contribution

Candidate Name  
**S. RAJA KRISHNAMOORTHY**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: IL District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5079**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GAIL SCHWARTZ FOR CONGRESS**

Mailing Address PO BOX 1209

City State Zip Code  
CRESTED BUTTE CO 81224

Purpose of Disbursement  
Contribution

Candidate Name  
**GAIL SHERIDAN SCHWARTZ**

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify) ▼  
State: CO District: 03

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5065**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

7500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial) <b>A. GRACE FOR NEW YORK</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address PO BOX 656555		<b>Transaction ID : SB23.5083</b>
City FRESH MEADOWS	State NY	
Purpose of Disbursement Contribution	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>GRACE MENG</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NY District: 06	

Full Name (Last, First, Middle Initial) <b>B. GREGORY FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address PO BOX 478		<b>Transaction ID : SB23.5090</b>
City AMITYVILLE	State NY	
Purpose of Disbursement Contribution	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>DUWAYNE GREGORY</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NY District: 02	

Full Name (Last, First, Middle Initial) <b>C. HALL FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2016
Mailing Address 249 E. OCEAN BLVD. SUITE 685		<b>Transaction ID : SB23.5030</b>
City LONG BEACH	State CA	
Purpose of Disbursement Contribution	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>ISADORE HALL III</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 44	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> 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 type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. KIM MYERS FOR CONGRESS**

Mailing Address PO BOX 1255

City VESTAL State NY Zip Code 13850

Purpose of Disbursement  
Contribution

Candidate Name  
**KIM MYERS**

Office Sought:  House  
 Senate  
 President  
State: NY District: 22

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5040**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LUANN BENNETT FOR CONGRESS**

Mailing Address PO BOX 446

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
Contribution

Candidate Name  
**LUANN BENNETT**

Office Sought:  House  
 Senate  
 President  
State: VA District: 10

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2016

**Transaction ID : SB23.4998**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIKE HONDA FOR CONGRESS**

Mailing Address C/O CONTRIBUTION SOLUTIONS, LLC  
300 S. FIRST STREET, SUITE 350

City SAN JOSE State CA Zip Code 95113

Purpose of Disbursement  
Contribution

Candidate Name  
**MIKE HONDA**

Office Sought:  House  
 Senate  
 President  
State: CA District: 17

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5072**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

12500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. MONICA VERNON FOR CONGRESS**

Mailing Address PO BOX 1635

City CEDAR RAPIDS State IA Zip Code 52406

Purpose of Disbursement  
Contribution

Candidate Name

**MONICA W VERNON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5046**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MOWRER FOR IOWA**

Mailing Address PO BOX 13470

City DES MOINES State IA Zip Code 50310

Purpose of Disbursement  
Contribution

Candidate Name

**JIM MOWRER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IA District: 03

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5043**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. NELSON FOR WISCONSIN**

Mailing Address PO BOX 348

City KAUKAUNA State WI Zip Code 54130

Purpose of Disbursement  
Contribution

Candidate Name

**TOM NELSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

**Transaction ID : SB23.5053**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. PEOPLE FOR BEN**

Mailing Address PO BOX 31129

City State Zip Code  
SANTA FE NM 87594

Purpose of Disbursement  
Contribution

Candidate Name

**BEN R LUJAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : **SB23.5087**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PETE AGUILAR FOR CONGRESS**

Mailing Address PO BOX 10954

City State Zip Code  
SAN BERNARDINO CA 92423

Purpose of Disbursement  
Contribution

Candidate Name

**PETE AGUILAR**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 31

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : **SB23.5077**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RICHMOND FOR CONGRESS**

Mailing Address 1631 ELYSIAN FIELDS  
SUITE 150

City State Zip Code  
NEW ORLEANS LA 70126

Purpose of Disbursement  
Contribution

Candidate Name

**CEDRIC L. RICHMOND**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 28 / 2016

Transaction ID : **SB23.5068**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

12500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. ROSEN FOR NEVADA**

Mailing Address 1000 N. GREEN VALLEY PKWY  
#440-177

City HENDERSON State NV Zip Code 89074

Purpose of Disbursement  
Contribution

Candidate Name

**JACKY ROSEN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	6

**Transaction ID : SB23.4999**

Amount of Each Disbursement this Period

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. RUBEN KIHUEN FOR CONGRESS**

Mailing Address P.O. BOX 458

City LAS VEGAS State NV Zip Code 89125

Purpose of Disbursement  
Contribution

Candidate Name

**RUBEN KIHUEN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	6

**Transaction ID : SB23.4995**

Amount of Each Disbursement this Period

5	0	0	0	.	0	0
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. SCHNEIDER FOR CONGRESS**

Mailing Address PO BOX 1318

City DEERFIELD State IL Zip Code 60015

Purpose of Disbursement  
Contribution

Candidate Name

**BRADLEY SCOTT SCHNEIDER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	8		2	0	1	6

**Transaction ID : SB23.5026**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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Memo Item

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

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

1	0	0	0	.	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

Full Name (Last, First, Middle Initial)

**A. TERRI BONOFF FOR CONGRESS**

Mailing Address 807 BROADWAY STREET NE  
#125

City MINNEAPOLIS State MN Zip Code 55413

Purpose of Disbursement  
Contribution

Candidate Name  
**TERRI BONOFF**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5034**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. TOM O'HALLERAN FOR CONGRESS**

Mailing Address PO BOX 20375

City SEDONA State AZ Zip Code 86341

Purpose of Disbursement  
Contribution

Candidate Name  
**TOM O'HALLERAN**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5047**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. VICENTE GONZALEZ FOR CONGRESS**

Mailing Address 121 NORTH 10TH STREET

City MCALLEN State TX Zip Code 78501

Purpose of Disbursement  
Contribution

Candidate Name  
**VICENTE GONZALEZ**

Office Sought:  House  
 Senate  
 President  
State: TX District: 15

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2016

Transaction ID : **SB23.5050**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

147500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 30 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Branding Bliss</b>	Nature of Debt (Purpose): Gift Bags for Event
Mailing Address 53 Jane Jacobs Street	
City State Zip Code Mount Pleasant SC 29464	

Outstanding Balance Beginning This Period 4999.46	<b>Transaction ID : SD10.4973</b>	
Amount Incurred This Period 0.00	Payment This Period 4999.46	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cannon Green Charleston</b>	Nature of Debt (Purpose): Catering
Mailing Address 103 Spring Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 21179.17	<b>Transaction ID : SD10.4971</b>	
Amount Incurred This Period 0.00	Payment This Period 21179.17	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Francis Marion Hotel</b>	Nature of Debt (Purpose): Travel Expenses
Mailing Address 387 King Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 3510.16	<b>Transaction ID : SD10.4975</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3510.16

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3510.16
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 31 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hyatt House Charleston</b>	Nature of Debt (Purpose): Travel Expenses
Mailing Address 560 King Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 7755.07	<b>Transaction ID : SD10.4986</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7755.07

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hyatt Place Charleston</b>	Nature of Debt (Purpose): Catering
Mailing Address 560 King Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 10415.46	<b>Transaction ID : SD10.4981</b>	
Amount Incurred This Period 358.05	Payment This Period 0.00	Outstanding Balance at Close of This Period 10773.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hyatt Place Charleston</b>	Nature of Debt (Purpose): Transportation Expenses
Mailing Address 560 King Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 4230.00	<b>Transaction ID : SD10.4983</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4230.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	22758.58
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : SD10.4983

The invoice for the transportation expenses is being reviewed and the amount is currently in dispute with the vendor.

Form/Schedule:

Transaction ID:



**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Hyatt Place Charleston</b>	Nature of Debt (Purpose): Travel Expenses
Mailing Address 560 King Street	
City State Zip Code Charleston SC 29403	

Outstanding Balance Beginning This Period 2383.57	<b>Transaction ID : SD10.4984</b>	
Amount Incurred This Period 27.63	Payment This Period 0.00	Outstanding Balance at Close of This Period 2411.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Images Photography</b>	Nature of Debt (Purpose): Photography
Mailing Address P.O. Box 70832	
City State Zip Code Charleston SC 29415	

Outstanding Balance Beginning This Period 575.00	<b>Transaction ID : SD10.4977</b>	
Amount Incurred This Period 0.00	Payment This Period 575.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kiawah Island Golf Resort</b>	Nature of Debt (Purpose): Golf Packages for Event
Mailing Address One Sanctuary Beach Drive	
City State Zip Code Kiawah Island SC 29455	

Outstanding Balance Beginning This Period 911.00	<b>Transaction ID : SD10.4974</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 911.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3322.20
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 34 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Kiawah Island Golf Resort</b>	Nature of Debt (Purpose): Catering
Mailing Address One Sanctuary Beach Drive	
City State Zip Code Kiawah Island SC 29455	

Outstanding Balance Beginning This Period <input type="text" value="867.38"/>	<b>Transaction ID : SD10.4987</b>	
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="867.38"/>

B. 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"/>

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="867.38"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="30458.32"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="30458.32"/>