

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

SYNERGY PAC

ADDRESS (number and street) 6849 Old Dominion Drive
Suite 222
McLean VA 22101-
 Check if different than previously reported. (ACC)

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

C C00409623 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

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

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

(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

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

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

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

5. Covering Period: [MM] [DD] / [MM] [DD] / [YYYY] 2015 through [MM] [DD] / [MM] [DD] / [YYYY] 2015

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

Type or Print Name of Treasurer Leslie J. Kerman

Signature of Treasurer Leslie J. Kerman [Electronically Filed] Date 07 27 2015

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

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

SYNERGY 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="2015"/>		78578.38
(b) Cash on Hand at Beginning of Reporting Period.....	78578.38	
(c) Total Receipts (from Line 19)	107150.00	107150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	185728.38	185728.38
7. Total Disbursements (from Line 31).....	103574.60	103574.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	82153.78	82153.78
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SYNERGY 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).....	17450.00	17450.00
(ii) Unitemized	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	17650.00	17650.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	89500.00	89500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	107150.00	107150.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	107150.00	107150.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	107150.00	107150.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	77506.20	77506.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	77506.20	77506.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26068.40	26068.40
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)) ..	103574.60	103574.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	103574.60	103574.60

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)	107150.00	107150.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	107150.00	107150.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	77506.20	77506.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	77506.20	77506.20

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 32
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. Richard J. Black

Mailing Address 17214 Crescent Canyon Drive

City	State	Zip Code
Houston	TX	77095

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

Name of Employer	Occupation
Siluria Technologies	Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	21	/	2015

Transaction ID : SA11AI.7850

Amount of Each Receipt this Period
1000.00

Contribution

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

Mailing Address 1796 West Wesley Road NW

City	State	Zip Code
Atlanta	GA	30328

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

Name of Employer	Occupation
Cox Enterprises	EVP & Chief Operations Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.7805

Amount of Each Receipt this Period
1200.00

Contribution

Full Name (Last, First, Middle Initial)
C. Dallas S. Clement

Mailing Address 4350 Harris Valley Road NW

City	State	Zip Code
Atlanta	GA	30327

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

Name of Employer	Occupation
Cox Enterprises	EVP & Chief Financial Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	18	/	2015

Transaction ID : SA11AI.7808

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	3200.00
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 32
	<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)
SYNERGY PAC

A. Edward J. Dineen
Full Name (Last, First, Middle Initial)

Mailing Address 11 S. Lamerie Way

City The Woodlands State TX Zip Code 77382

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

Name of Employer Siluria Technologies Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2015
Transaction ID : SA11AI.7851

Amount of Each Receipt this Period
 2000.00

Contribution

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

Mailing Address 9117 Eves Circle

City Roswell State GA Zip Code 30076-4401

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

Name of Employer Cox Media Group Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 18 / 2015
Transaction ID : SA11AI.7806

Amount of Each Receipt this Period
 750.00

Contribution

C. Gary L. Koehler
Full Name (Last, First, Middle Initial)

Mailing Address 511 West 23rd Street

City Houston State TX Zip Code 77008-1939

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

Name of Employer Siluria Technologies Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 04 / 2015
Transaction ID : SA11AI.7857

Amount of Each Receipt this Period
 1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 32
	<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)
SYNERGY PAC

A. Marybeth Leamer
Full Name (Last, First, Middle Initial)

Mailing Address 1007 Tullamore Place

City Alpharetta State GA Zip Code 30022-8077

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

Name of Employer Cox Enterprises, Inc. Occupation EVP HR & Administration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 26 / 2015
Transaction ID : SA11AI.7801

Amount of Each Receipt this Period 2000.00

Contribution

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

Mailing Address 21 Buena Vista Rd.

City South San Francisco State CA Zip Code 94080

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

Name of Employer Siluria Technologies Occupation VP, Engineering

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2015
Transaction ID : SA11AI.7855

Amount of Each Receipt this Period 1000.00

Contribution

C. Robert D. Rutstein
Full Name (Last, First, Middle Initial)

Mailing Address 100 Ferncliff Dr.

City West Hartford State CT Zip Code 06117-1026

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

Name of Employer Hartford Podiatry Group Occupation Podiatrist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2015
Transaction ID : SA11AI.7745

Amount of Each Receipt this Period 500.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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 9 OF 32
	<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)
SYNERGY PAC

A. Erik C. Scher
Full Name (Last, First, Middle Initial)

Mailing Address 409 Illinois Street

City San Francisco State CA Zip Code 94158

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

Name of Employer Siluria Technologies Occupation EVP, Research & Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 04 / 2015
Transaction ID : SA11AI.7856

Amount of Each Receipt this Period 1000.00

Contribution

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

Mailing Address 630 Regency Forest Court

City Atlanta State GA Zip Code 30342-1446

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

Name of Employer Cox Automotive, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 18 / 2015
Transaction ID : SA11AI.7807

Amount of Each Receipt this Period 2000.00

Contribution

C. Alexander Cox Taylor
Full Name (Last, First, Middle Initial)

Mailing Address 229 Nacoochee Drive NW

City Atlanta State GA Zip Code 30305-4107

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

Name of Employer Cox Enterprises Occupation Executive VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 01 / 2015
Transaction ID : SA11AI.7802

Amount of Each Receipt this Period 2000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial) A. Stephen M. Williams		Date of Receipt MM / DD / YYYY 05 / 04 / 2015 Transaction ID : SA11AI.7853
Mailing Address 2003 Anchor Lake Lane		Amount of Each Receipt this Period 500.00
City Katy	State TX	Zip Code 77494
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Siluria Technologies	Occupation Contract Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jeffrey Wood		Date of Receipt MM / DD / YYYY 05 / 04 / 2015 Transaction ID : SA11AI.7854
Mailing Address 4001 Piping Rock Lane		Amount of Each Receipt this Period 1000.00
City Houston	State TX	Zip Code 77027
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Siluria Technologies	Occupation Chief Financial Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. David J. Zaziski		Date of Receipt MM / DD / YYYY 04 / 21 / 2015 Transaction ID : SA11AI.7852
Mailing Address 930 Peninsula Avenue Apt. 203		Amount of Each Receipt this Period 500.00
City San Mateo	State CA	Zip Code 94401
FEC ID number of contributing federal political committee. C	Contribution	
Name of Employer Siluria Technologies	Occupation Director of Government Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	17450.00

**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 11 OF 32
<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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 F STREET, N.W.
SUITE 350

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00181826

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
04 / 02 / 2015

Transaction ID : SA11C.7779

Amount of Each Receipt this Period
5000.00

Contribution

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

Mailing Address WORLDWIDE HEADQUARTERS
1932 WYNNTON ROAD

City COLUMBUS State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

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
04 / 28 / 2015

Transaction ID : SA11C.7849

Amount of Each Receipt this Period
2500.00

Contribution

Full Name (Last, First, Middle Initial)
C. APPLIED MATERIALS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 PARK ROAD, SUITE E

City BURLINGAME State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C** C00406892

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 26 / 2015

Transaction ID : SA11C.7799

Amount of Each Receipt this Period
2000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	9500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 32
<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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)
A. APPLIED MATERIALS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 20 PARK ROAD, SUITE E

City BURLINGAME State CA Zip Code 94010

FEC ID number of contributing federal political committee. **C** C00406892

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 / 18 / 2015
Transaction ID : SA11C.7859

Amount of Each Receipt this Period
 500.00

Contribution

Full Name (Last, First, Middle Initial)
B. BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 1101 WILSON BLVD.

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00281212

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
 05 / 26 / 2015
Transaction ID : SA11C.7800

Amount of Each Receipt this Period
 5000.00

Contribution

Full Name (Last, First, Middle Initial)
C. CHICAGO BOARD OPTIONS EXCHANGE PAC

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
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2015
Transaction ID : SA11C.7863

Amount of Each Receipt this Period
 2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 32
<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)
SYNERGY PAC

A. COBHAM HOLDINGS INC POLITICAL ACTION COMMITTEE 'COBHAM PAC'

Full Name (Last, First, Middle Initial)
Mailing Address 2121 CRYSTAL DRIVE

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00457051

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
 03 / 18 / 2015

Transaction ID : SA11C.7746

Amount of Each Receipt this Period
5000.00

Contribution

B. COX ENTERPRISES PAC (COXPAC) INC.

Full Name (Last, First, Middle Initial)
Mailing Address 975 F STREET, NW, SUITE 300

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00477653

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
 04 / 27 / 2015

Transaction ID : SA11C.7847

Amount of Each Receipt this Period
5000.00

Contribution

C. INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 555 12TH STREET, NW SUITE 660

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00217638

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
 04 / 21 / 2015

Transaction ID : SA11C.7846

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 14 OF 32
<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)
SYNERGY PAC

A. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2015

Transaction ID : SA11C.7848

Amount of Each Receipt this Period
5000.00

Contribution

B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1919 M STREET, NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2015

Transaction ID : SA11C.7743

Amount of Each Receipt this Period
5000.00

Contribution

C. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 07 / 2015

Transaction ID : SA11C.7780

Amount of Each Receipt this Period
1000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 15 OF 32
<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)
SYNERGY PAC

A. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 3601 VINCENNES ROAD
 City INDIANAPOLIS State IN Zip Code 46268-1154
 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 06 / 18 / 2015
Transaction ID : SA11C.7809
 Amount of Each Receipt this Period 5000.00
 Contribution

B. NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS, INC. POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 1875 I STREET, NW SUITE 600
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00303339
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 09 / 2015
Transaction ID : SA11C.7742
 Amount of Each Receipt this Period 5000.00
 Contribution

C. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 NORTH MICHIGAN AVENUE
 City CHICAGO State IL Zip Code 60611
 FEC ID number of contributing federal political committee. **C** C00030718
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 07 / 2015
Transaction ID : SA11C.7781
 Amount of Each Receipt this Period 5000.00
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
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 16 OF 32
<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)
SYNERGY PAC

A. NORTHEAST UTILITIES EMPLOYEES' POLITICAL ACTION COMMITTEE-FEDERAL

Full Name (Last, First, Middle Initial)
Mailing Address 901 F STREET NW
SUITE 602

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2015

Transaction ID : SA11C.7803

Amount of Each Receipt this Period
3500.00

Contribution

B. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2015

Transaction ID : SA11C.7747

Amount of Each Receipt this Period
5000.00

Contribution

C. THE COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 750

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2015

Transaction ID : SA11C.7804

Amount of Each Receipt this Period
5000.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	13500.00
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 17 OF 32
<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)
SYNERGY PAC

A. Full Name (Last, First, Middle Initial)
TYCO INTERNATIONAL MANAGEMENT COMPANY EMPLOYEES POLITICAL ACTION COMMITTEE (TYCO EMPLOYEES)

Mailing Address 9 ROSZEL ROAD

City PRINCETON State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00113753

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
 04 / 07 / 2015

Transaction ID : SA11C.7782

Amount of Each Receipt this Period
 5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

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
 03 / 16 / 2015

Transaction ID : SA11C.7744

Amount of Each Receipt this Period
 5000.00

Contribution

C. Full Name (Last, First, Middle Initial)
WINE INSTITUTE PAC

Mailing Address 700 13TH STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00065219

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 / 29 / 2015

Transaction ID : SA11C.7862

Amount of Each Receipt this Period
 2500.00

Contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

A. Full Name (Last, First, Middle Initial)
ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

Mailing Address 1201 F STREET NW

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00235036

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
 05 / 26 / 2015

Transaction ID : SA11C.7798

Amount of Each Receipt this Period
5000.00

Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	89500.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, NE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : SB21B.7754

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, NE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees & Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 19 / 2015

Transaction ID : SB21B.7757

Amount of Each Disbursement this Period

11978.43

Full Name (Last, First, Middle Initial)

C. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, NE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees & Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2015

Transaction ID : SB21B.7785

Amount of Each Disbursement this Period

9160.39

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

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

23138.82

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, NE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Fundraising: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7811**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
PAC Fundraising: Beverages (Itemized Below)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7750**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
PAC Fundraising Expenses (Over \$200 Itemized Below)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.7821**

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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Bouchon

Mailing Address 6534 Washington Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Fundraising Expense: Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.7877**

Amount of Each Disbursement this Period

104.96

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Bouchon

Mailing Address 6534 Washington Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Fundraising Expense: Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.7878**

Amount of Each Disbursement this Period

492.24

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Bouchon

Mailing Address 6534 Washington Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Fundraising Expense: Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : **SB21B.7879**

Amount of Each Disbursement this Period

212.12

[MEMO ITEM]

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

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

0.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Bouchon

Mailing Address 6534 Washington Street

City Yountville State CA Zip Code 94599

Purpose of Disbursement
PAC Fundraising Expense: Meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : SB21B.7880

Amount of Each Disbursement this Period

16.75

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Boulevard

Mailing Address 1 Mission Street

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
PAC Fundraising Expense: Food

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2015

Transaction ID : SB21B.7827

Amount of Each Disbursement this Period

245.65

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Caves Valley Golf Club

Mailing Address 2910 Blendon Road

City Owings Mills State MD Zip Code 21117

Purpose of Disbursement
PAC Fundraising: Golf, Meals & Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : SB21B.7749

Amount of Each Disbursement this Period

5000.10

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

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

5000.10

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Infinity Hall Hartford

Mailing Address 32 Front Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement
PAC Fundraising: Beverages

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : **SB21B.7751**

Amount of Each Disbursement this Period

480.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. The Vinci Group

Mailing Address 54 Robert Road

City Manchester State CT Zip Code 06040

Purpose of Disbursement
PAC Fundraising Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2015

Transaction ID : **SB21B.7753**

Amount of Each Disbursement this Period

464.43

Full Name (Last, First, Middle Initial)

C. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2015

Transaction ID : **SB21B.7748**

Amount of Each Disbursement this Period

2025.00

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

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

2489.43

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2015

Transaction ID : SB21B.7755

Amount of Each Disbursement this Period

2261.73

Category/
Type

Full Name (Last, First, Middle Initial)

B. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2015

Transaction ID : SB21B.7756

Amount of Each Disbursement this Period

2080.91

Category/
Type

Full Name (Last, First, Middle Initial)

C. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 03 / 2015

Transaction ID : SB21B.7784

Amount of Each Disbursement this Period

2025.00

Category/
Type

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

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

6367.64

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 02 / 2015

Transaction ID : SB21B.7810

Amount of Each Disbursement this Period

2025.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. The Waverly Group, Inc.

Mailing Address 6849 Old Dominion Dr.
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC Mngmt/Compliance: Fees & Expenses

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2015

Transaction ID : SB21B.7787

Amount of Each Disbursement this Period

2025.00

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

Category/
Type

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

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

4050.00

77461.20

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 413 New Jersey Avenue, NE
Basement Level

City Washington State DC Zip Code 20003

Purpose of Disbursement
In-Kind Contribution: Airfare (Itemized Below)

Candidate Name
MIKE DOYLE

Office Sought: House
 Senate
 President
State: PA District: 14

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 06 / 2015

Transaction ID : SB23.7819

Amount of Each Disbursement this Period

442.10

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 36001

City Ft. Lauderdale State FL Zip Code 33336

Purpose of Disbursement
In-Kind Contributions: Food & Beverage (Itemized Below)

Candidate Name
MIKE DOYLE

Office Sought: House
 Senate
 President
State: PA District: 14

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : SB23.7868

Amount of Each Disbursement this Period

126.30

Full Name (Last, First, Middle Initial)

C. CAIN FOR CONGRESS

Mailing Address P.O. BOX 1523

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name
EMILY ANN CAIN

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2015

Transaction ID : SB23.7775

Amount of Each Disbursement this Period

2000.00

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

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

2568.40

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ELIZABETH ESTY

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement Contribution

Candidate Name
ELIZABETH ESTY

Office Sought: House Senate President
State: CT District: 05

Disbursement For: 2016
 Primary General
 Other (specify) Convention

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2015

Transaction ID : SB23.7783

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JOHN DELANEY

Mailing Address PO BOX 70835

City BETHESDA State MD Zip Code 20813

Purpose of Disbursement Contribution

Candidate Name
JOHN K DELANEY

Office Sought: House Senate President
State: MD District: 06

Disbursement For: 2016
 Primary General
 Other (specify) Convention

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 17 / 2015

Transaction ID : SB23.7774

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. GRAHAM FOR CONGRESS

Mailing Address PO BOX 310

City TALLAHASSEE State FL Zip Code 32302

Purpose of Disbursement Contribution

Candidate Name
GWEN GRAHAM

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

Disbursement For: 2016
 Primary General
 Other (specify) Convention

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 23 / 2015

Transaction ID : SB23.7767

Amount of Each Disbursement this Period

1000.00

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

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

6000.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. HASTINGS FOR CONGRESS

Mailing Address P.O. BOX 100277

City State Zip Code
FT. LAUDERDALE FL 33310

Purpose of Disbursement
Voided Contribution: Check Dated 06/14/2014

Candidate Name
ALCEE L HASTINGS

Office Sought: House Senate President
Disbursement For: 2014
 Primary General
 Other (specify) ▼
State: FL District: 20

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2015

Transaction ID : SB23.7759

Amount of Each Disbursement this Period

-2500.00

Full Name (Last, First, Middle Initial)

B. HASTINGS FOR CONGRESS

Mailing Address P.O. BOX 100277

City State Zip Code
FT. LAUDERDALE FL 33310

Purpose of Disbursement
Contribution

Candidate Name
ALCEE L HASTINGS

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) ▼
State: FL District: 20

Date of Disbursement

MM / DD / YYYY
04 / 22 / 2015

Transaction ID : SB23.7812

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Hillary for America

Mailing Address PO Box 5256

City State Zip Code
New York NY 10185-5256

Purpose of Disbursement
Contribution

Candidate Name
Hillary Rodham Clinton

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

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2015

Transaction ID : SB23.7866

Amount of Each Disbursement this Period

5000.00

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

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

5000.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. JetBlue Airways

Mailing Address 27-01 Queens Plaza

City North Long Island City State NY Zip Code 11101

Purpose of Disbursement
In-Kind Contribution: Food & Beverage

Candidate Name
MIKE DOYLE

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: PA District: 14

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	5

Transaction ID : SB23.7870

Amount of Each Disbursement this Period

3	1	.	0	0
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[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. KUSTER FOR CONGRESS, INC.

Mailing Address P.O. BOX 1498

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
Contribution

Candidate Name
ANN MCLANE KUSTER

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

Date of Disbursement

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

Transaction ID : SB23.7768

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. KUSTER FOR CONGRESS, INC.

Mailing Address P.O. BOX 1498

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
Contribution

Candidate Name
ANN MCLANE KUSTER

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

Date of Disbursement

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

Transaction ID : SB23.7773

Amount of Each Disbursement this Period

2	5	.	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. LaPlaya Beach Restaurant

Mailing Address 9891 Gulf Shore Road

City Naples State FL Zip Code 34108

Purpose of Disbursement
In-Kind Contribution: Food & Beverage

Candidate Name
MIKE DOYLE

Office Sought: House
 Senate
 President
State: PA District: 14

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : **SB23.7869**

Amount of Each Disbursement this Period

95.30

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MOULTON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2013

City SALEM State MA Zip Code 01970

Purpose of Disbursement
Contribution

Candidate Name
SETH MOULTON

Office Sought: House
 Senate
 President
State: MA District: 06

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 23 / 2015

Transaction ID : **SB23.7769**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. RANGEL FOR CONGRESS

Mailing Address PO BOX 5577

City NEW YORK State NY Zip Code 10027

Purpose of Disbursement
Voided Contribution: Check Dated 03/25/2014

Candidate Name
CHARLES B. RANGEL

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2015

Transaction ID : **SB23.7758**

Amount of Each Disbursement this Period

-1000.00

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

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

0.00

**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)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. RICHMOND FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		22		2015

Mailing Address 1631 ELYSIAN FIELDS
SUITE 150

Transaction ID : SB23.7813

City NEW ORLEANS State LA Zip Code 70126

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

CEDRIC L RICHMOND

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

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. THE BILL KEATING COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		23		2015

Mailing Address P.O. BOX 3065

Transaction ID : SB23.7771

City BUZZARDS BAY State MA Zip Code 02532

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name

WILLIAM RICHARD KEATING

Office Sought: House
 Senate
 President
State: MA District: 09

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. US Airways

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2015

Mailing Address 4000 E. Sky Harbord Blvd.

Transaction ID : SB23.7820

City Phoenix State AZ Zip Code 85034

Amount of Each Disbursement this Period

442.10

Purpose of Disbursement
In-Kind Contribution: Airfare

Category/ Type

Candidate Name

MIKE DOYLE

Office Sought: House
 Senate
 President
State: PA District: 14

Disbursement For: 2016
 Primary General
 Other (specify) ▼

[MEMO ITEM]

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

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

5000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
SYNERGY PAC

Full Name (Last, First, Middle Initial)

A. Van Hollen for Senate

Mailing Address 106054 Concord Street
Suite 202

City Kensington State MD Zip Code 20895

Purpose of Disbursement
Contribution

Candidate Name
Chris Van Hollen

Office Sought: House
 Senate
 President
State: MD District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB23.7772

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

--	--	--	--	--	--	--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

2	5	0	0	.	0	0
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2	6	0	6	8	.	4	0
---	---	---	---	---	---	---	---