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FORM 3X	

10/26/2016 11 : 10

PAGE 1 / 33

REPO	ORT OI	F REC	EIPTS
AND	DISBU	IRSEM	ENTS
For Othe	er Than An A	Authorized	Committee

1. NAME OF COMMITTEE (in full)       TYPE OR PRINT ▼ over the lines.       Example: If bping, type over the lines.       12FE4M5         American Horizons PAC       3824 Codes Springs Rd								Office Us	e Only	
ADDRESS (number and street) <sup>13824</sup> Cedar Springs Rd          ✓       Check if different than previously reported. (ACC) <sup>1801-4905,</sup> 2. FEC IDENTIFICATION NUMBER ▼        CITY ▲        STATE ▲          2. FEC IDENTIFICATION NUMBER ▼        CITY ▲        STATE ▲          2. FEC IDENTIFICATION NUMBER ▼        CITY ▲        STATE ▲          2. FEC IDENTIFICATION NUMBER ▼        CITY ▲        STATE ▲          3. IS THIS         REPORT         (Choose One)           Amethy Report           Amethy Report          (a) Quarterly Report        (b) Monthly        Feb 20 (M2)        May 20 (M5)           Aug 20 (M8)          (a) Quarterly Report        (b) Monthly        Feb 20 (M2)           Mar 20 (M3)           Jun 20 (M6)           Sep 20 (M9)           Proce SQL(M2)          (a) Quarterly Report           Conservice           Jun 20 (M6)           Sep 20 (M9)           Jun 20 (M1)           Jun 20 (M6)           Jun 20 (M1)           Jun 20 (M1)           Jun 20 (M1)           Jun 20 (M1)               Cuarterly Report           Co			YPE OR PRINT ▼		1 21	ng, type	12FE4	M5		
ADDRESS (number and street)       #801-4065,         Performation       Partials         C       CODE (ACC)         Datas       TX         C       CODE (ACC)         (a) Conterly Reports:       April 15         Outaretry Report (C01)       Apr 20 (M3)         January 31       Code (ACC)         C       CODE (C2)         Outaretry Report (C2)       Conterly Report (C2)         Outaretry Report (C2)       Code (ACC)         Det (C1)       Code (ACC)         C       CODE (S)         C       Conterly Report (C2)         Octor (TER)	American H	orizons PAC	;							
ADDRESS (number and street)       #801-4906.            • Chack if different reported: (ACC)        Pallas          2. FEC IDENTIFICATION NUMBER        CITY        STATE          3. IS THIS        NEW        AMENDED          (a) Quarterly Reports:        April 15        Outered to the point          (a) Quarterly Report (02)        Outered to the to        Outered to the point          (b) January 31        State of        State of          2. October 15        General (30G)        Pannet (30F)        Pannet (30F)          3. January 31        State of        State of          2. October 15        General (30G)        Report (10, 1, 0, 1, 0, 1, 0, 1, 0, 1, 0, 1, 0, 1, 0, 1, 0, 1										
Check if different than previously reported. (ACC) <ul> <li>Dallas</li> <li>TX</li> <li>T5219</li> <li>FEC IDENTIFICATION NUMBER</li> <li>CITY ▲</li> <li>STATE ▲</li> <li>ZIP CODE ▲</li> <li>STATE ▲</li> <li>ZIP CODE ▲</li> <li>AMENDED</li> <li>APERDET</li> <li>APERDET</li> <li>APERDET</li> <li>APERDET</li> <li>APERDET</li> <li>APERDET</li> <li>APERDED</li> <li>APERDET</li> <li>APERDET<!--</td--><td>ADDRESS (numbe</td><td>er and street)</td><td>3824 Cedar Springs Ro</td><td>t</td><td></td><td></td><td>     </td><td></td><td></td><td></td></li></ul>	ADDRESS (numbe	er and street)	3824 Cedar Springs Ro	t						
than previously reported. (AGC)       Dallas       TX       75219         2. FEC IDENTIFICATION NUMBER       CITY ▲       STATE ▲       ZIP CODE ▲         2. FEC IDENTIFICATION NUMBER       CITY ▲       STATE ▲       ZIP CODE ▲         2. FEC IDENTIFICATION NUMBER       CITY ▲       STATE ▲       ZIP CODE ▲         2. FEC IDENTIFICATION NUMBER       CITY ▲       STATE ▲       ZIP CODE ▲         3. IS THIS       NEW       AMENDED       AMENDED         (Choose One)       (A)       Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Dec 20 (M12)         (a) Quarterly Reports:       (A)       April 15       (A)       Apr 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (b) Quarterly Report (Q2)       July 31 Mid Year       PRE-Election       Convention (12C)       Special (12S)       Prever Chilling         (a) Quarterly Report (Q2)       July 31 Mid Year       PRE-Election       General (30G)       Runoff (30R)       Special (30S)         (b) 30-Day       PRE-Election       General (30G)       Runoff (30R)       Special (30S)         (c) 30-Day       PRE-Election       General (30G)       Runoff (30R)       Special (30S)         (c) 30-Day       POST-Election       General (30G)       Runoff (30R)	▼	,	#801-4905,							1
C       C00619577       3. IS THIS REPORT       X       NEW (N)       AMENDED (A)         4.       TYPE OF REPORT (Choose One)       (b)       Monthly Report (Choose One)       May 20 (M5)       Aug 20 (M8)       Nov 20 (M1) (Montelidant Vera Chilly Due On:         (a)       Quarterly Reports:       (b)       Mart 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Dec 20 (M12) Vera Chilly Due On:       Mar 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (a)       Quarterly Report (Q2) Outarterly Report (Q2)       (c)       12-Day PRE-Election Report for the:       Convention (12C)       Special (12S)         (c)       30-Day POST-Election (TER)       Feport for the:       General (30G)       Runoff (30R)       Special (30S)         1       0       /       0       /       2016       through 10       /       2016         5.       Covering Period       10       /       0       /       2016       through 10       /       2016         5.       Covering Period       10       /       0       /       2016       through 10       /       2016         1       /       0       /       0       /       2016       through       10       /       2016	than pre	viously	Dallas				ТХ	75219		
C       COURTING       REPORT       K       (N)       OR       (A)         4.       TYPE OF REPORT (choose One)       (b)       Monthly Report       Feb 20 (M2)       May 20 (M5)       Aug 20 (M8)       Nov 20 (M1)         (a)       Quarterly Reports:       Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Dec 20 (M12)         (a)       Quarterly Report (Q1)       April 15       April 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         (b)       Quarterly Report (Q2)       October 15       Quarterly Report (Q3)       Primary (12P)       K       General (12G)       Runoff (12R)         January 31       Year Only (M7)       October 15       Counterly Report (C1F)       General (30G)       Runoff (30R)       Special (30S)         January 31       Year Only (M7)       Off of the:       General (30G)       Runoff (30R)       Special (30S)         Termination Report       Termination Report       Termination Report       General (30G)       Runoff (30R)       Special (30S)         I       Off of the:       Image: Counterly field       Image: Counterly field       Image: Counterly field       Image: Counterly field         Signature of Treasurer       Haves, Ian,       Image: Counterly field       Date       Image: Counterly field	2. FEC IDENTI	FICATION NUM	IBER V	CITY ▲		S	STATE 🔺		ZIP COD	E 🔺
(Choose One)       Report       Peu 20 (W2)       May 20 (W3)       Add 20 (W3)       Add 20 (W3)       May 20 (W3)       Padd 20 (W3)       May 20 (W3)	<b>C</b> C0061	9577			× (					
(a) Ouarterly Reports:       Mar 20 (M3)       Jun 20 (M6)       Sep 20 (M9)       Use 20 (M12)         April 15       April 15       April 15       April 15       Mar 20 (M4)       Jul 20 (M7)       Oct 20 (M10)       Jan 31 (YE)         July 31       July 15       Outarterly Report (O2)       October 15       Primary (12P)       X       General (12G)       Runoff (12R)         January 31       Year-End Report (YE)       January 31       Election on       11       08       2016       State of         January 31       Year-End Report (Non-election Year Only) (MY)       Termination Report       General (30G)       Runoff (30R)       Special (30S)         Termination Report       Termination Report       10       01       2016       In the State of         5.       Covering Period       10       01       2016       through 10       19       2016         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, Ian,       IElectronically Filed]       Date       10       26       2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010       IElectronically Filed]       Image 10       Image 10       2016       Image 10       Image 10			Report	Feb 20 (M2)	1	May 20 (M5)	A	Aug 20 (M8)		Non-Election
April 15 Quarterly Repot (Q1) July 15 Quarterly Repot (Q2) October 15 Quarterly Repot (YE) January 31 Year-End Repot (YE) Date Termination Repot (d) 30-Day POST-Election General (30G) Runoff (30R) Special (30S) Repot for the: Election on Election on State of State	(a) Quarterly	Reports:		Mar 20 (M3)		Jun 20 (M6)	5	Sep 20 (M9)		Non-Election
July 15 Quarterly Report (Q2)       (c)       12-Day PRE-Election Report for the:       Primary (12P)       X       General (12G)       Hunoff (12H)         Quarterly Report (Q2)       October 15 Quarterly Report (03)       PRE-Election Report for the:       Convention (12C)       Special (12S)         January 31 Year-End Report (YE)       July 31 Mid-Year Report (Non-election Year Only) (MY)       Election on       11       08       2016       State of         (d)       30-Day POST-Election Year Only) (MY)       Election on       General (30G)       Runoff (30R)       Special (30S)         Termination Report (TER)       Termination Report       01       2016       through       10       19       2016         5.       Covering Period       10       01       2016       through       10       19       2016         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan,       Hawes, lan,       IElectronically Filed]       Date       10       26       2016         Signature of Treasurer       Hawes, lan,,       IElectronically Filed]       Date       10       26       2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010       FEC FORM 3X Rev. 05/2016	Apri	15		Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		
Quarterly Report (Q2)       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)       General (30G)         Termination Report (TER)       Report for the:         Image: Covering Period       10         Image: Covering Period       10 <td></td> <td> ,</td> <td>(C) 12-Day</td> <td></td> <td>Primary (12P</td> <td><b>x</b></td> <td>Gene</td> <td>ral (12G)</td> <td>E F</td> <td>Runoff (12R)</td>		,	(C) 12-Day		Primary (12P	<b>x</b>	Gene	ral (12G)	E F	Runoff (12R)
Quarterly Report (Q3)       January 31       Election on       Image: Market	Qua	rterly Report (Q2)			Convention (	12C)	Speci	al (12S)		
January 31 Year-End Report (YE)       July 31 Mid-Year Report (Non-election Year Only) (MY)       Election on       11       08       2016       State of         (d)       30-Day POST-Election (TER)       General (30G)       Runoff (30R)       Special (30S)         Termination Report (TER)       Termination Report       General (30G)       Runoff (30R)       Special (30S)         5.       Covering Period       10       01       2016       through       10       19, /       2016.         1       certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,       Hawes, lan, , ,       Ielectronically Filed]       Date       10       26, /       2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010       FEC FORM 3X, Rev. 05/2016	Qua	rterly Report (Q3)			M M /	D D /	YYYY	Y	in the	
Report (Non-election Year Only) (MY)       POST-Election Report       General (30G)       Runoff (30R)       Special (30S)         Termination Report (TER)       Termination Report       In the Election on       In the Electio	Year	-End Report (YE)	E	lection on	11	08	2016			
Termination Report (TER)       Termination Report         Election on       Election on         5. Covering Period       10         10       01         2016       through         10       19         2016       10         1 certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,         Type or Print Name of Treasurer         Signature of Treasurer         Hawes, lan, , ,         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,         Type or Print Name of Treasurer         Hawes, lan, , ,         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,         Type or Print Name of Treasurer         Hawes, lan, , ,         I certify Filed         Date         10       26         2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010         Office       Use         Use       FEC FORM 3X	Rep	ort (Non-election	POST-Electi		General (300	à)	Runo	ff (30R)		Special (30S)
5. Covering Period       10       01       2016       through       10       19       2016         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , , Type or Print Name of Treasurer       Hawes, lan, , ,        Ielectronically Filed]       Date       10       26       2016         Signature of Treasurer       Hawes, lan, , ,        Ielectronically Filed]       Date       10       26       2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010       Image: Signature of Signature of Signature of Signature of Signature of Signature of Treasurer       Image: Signature of					M M /	D D /	Y Y Y	Y		
5. Covering Period       10       01       2016       through       10       19       2016         I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,       Hawes, lan, , ,       Hawes, lan, , ,       I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Hawes, lan, , ,         Type or Print Name of Treasurer       Hawes, lan, , ,       [Electronically Filed]       Date       10       26       2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010       FEC FORM 3X Rev. 05/2016       FEC FORM 3X Rev. 05/2016			E	lection on					State of	
Hawes, lan, , ,       Hawes, lan, , ,         Signature of Treasurer       Hawes, lan, , ,         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010         Office       Use         Use       FEC FORM 3X         Rev. 05/2016	5. Covering Peri				through	10 M	_			
Type or Print Name of Treasurer         Signature of Treasurer         Hawes, Ian, , ,         [Electronically Filed]         Date         10         26         2016         NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 3010         Office         Use	I certify that I hav	e examined this		st of my know	ledge and b	pelief it is true	e, correct	and complet	e.	
Signature of Treasurer       Interest ratio       <	Type or Print Nan	ne of Treasurer								
Office Use FEC FORM 3X Rev. 05/2016	Signature of Treas	Burer Hawes,	Ian, , ,	[	Electronically	Filed] Da			D / Y	
Use Use Rev. 05/2016	NOTE: Submission	of false, erroneo	us, or incomplete inforr	nation may sub	ject the pers	son signing thi	s Report 1	to the penaltie	es of 52 L	J.S.C. § 30109

	J		
Γ	FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
V	Irite or Type Committee Name		
A	American Horizons PAC		
R	eport Covering the Period: From:	10 / D D / Y Y Y Y 10 01 2016	To: 10 / D - D / Y - Y - Y - Y 10 19 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		0.00
	(b) Cash on Hand at Beginning of Reporting Period	17094.91	
	(c) Total Receipts (from Line 19)	11695.00	1111667.50
	<ul><li>(d) Subtotal (add Lines 6(b) and</li><li>6(c) for Column A and Lines</li><li>6(a) and 6(c) for Column B)</li></ul>	28789.91	1111667.50
7.	Total Disbursements (from Line 31)	15097.08	1097974.67
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	13692.83	13692.83
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)	0.00	

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

#### For further information contact:

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

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

# DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

# American Horizons PAC

Report Covering the Period:       From:       Image: Marked and the period an						
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
<ul> <li>Contributions (other than loans) From:</li> <li>(a) Individuals/Persons Other</li> </ul>						
Than Political Committees     (i) Itemized (use Schedule A)	7925.00	284009.00				
(ii) Unitemized (iii) TOTAL (add	3770.00	827658.50				
Lines 11(a)(i) and (ii)	11695.00	1111667.50				
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00				
(such as PACs)(d) Total Contributions (add Lines	0.00	0.0				
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11695.00	1111667.50				
Party Committees	0.00	0.0				
All Loans Received	0.00	0.0				
Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.0				
(Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00				
to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00				
(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00				
(a) Non-Federal Account (from Schedule H3)	0.00	0.00				
(b) Levin Funds (from Schedule H5)	0.00	0.0				
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00				
Total Receipts (add Lines 11(d),						
12, 13, 14, 15, 16, 17, and 18(c))	11695.00	1111667.50				

20. Total Federal Receipts (subtract Line 18(c) from Line 19).......▶



	-7-		 111	166	57.50	)
			111	166	57.50	)

# DETAILED SUMMARY PAGE

of Disbursements

od 0.00 0.00 2392.08 0.00 0.00 0.00 0.00 0.00 0.00 705.00 0.00	COLUMN B Calendar Year-to-Date
0.00 0.00 2392.08 2392.08 0.00 0.00 0.00 0.00 0.00	
0.00 2392.08 2392.08 0.00 0.00 0.00 0.00 0.00	
2392.08 2392.08 0.00 0.00 2000.00 0.00 0.00 0.00	
2392.08 0.00 0.00 2000.00 0.00 0.00 0.00	
2392.08 0.00 0.00 2000.00 0.00 0.00 0.00	
0.00 0.00 2000.00 0.00 0.00	
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2000.00 0.00 0.00 0.00	
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	0.00
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705.00	34348.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
6097.08	1097974.67
	1097974.67
	0.00 0.00 0.00

### DETAILED SUMMARY PAGE

of Disbursements

COLUMN A

**Total This Period** 

FFC	Form	3X	(Rev	05/2016	١
I LO	I UIIII	JA	(1100.	03/2010	J

#### III. Net Contributions/ Operating Expenditures

33.	Total Contributions (other than loans)
	(from Line 11(d), page 3)
34.	Total Contribution Refunds
	(from Line 28(d))
35.	Net Contributions (other than loans)
	(subtract Line 34 from Line 33)
36.	Total Federal Operating Expenditures
	(add Line 21(a)(i) and Line 21(b))
37.	Offsets to Operating Expenditures
	(from Line 15, page 3)
38.	Net Operating Expenditures

(subtract Line 37 from Line 36) .....

						11695.00
		7			-7	
						705.00
		-7			-7	
1.1						10990.00
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1.1						2392.08
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1.1						0.00
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1.1.1.1			-			2392.08
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0.00	-7	 	7	 <u></u>	
1051626.67					
1031626.67	_			L	

COLUMN B

Calendar Year-to-Date



SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

FOR LINE NUMBER:

PAGE

6 OF

IT.	EMIZED RECEIPTS		Use separate schedule(s)	(ch	(check only one)									
11			for each category of the Detailed Summary Page		<b>4</b> 11a 13		11b	11c 15		2 6 [	17			
Ar or	y information copied from such Reports and Si for commercial purposes, other than using the	tatements ma name and a	ay not be sold or used by any p ddress of any political committed	erson e to s	for the	pur ntrib	pose of	soliciting	g conti	ributio	ons			
	NAME OF COMMITTEE (In Full)													
$\rangle$	American Horizons PAC													
Α.		ial) or Full O	rganization Name		Date o	f Re	eceipt							
	Mailing Address 329 PARISH DR			10 19 / Y Y Y Y 2016										
	City WAYNE	State NJ	Zip Code 07470-0000		Transaction ID : SA11AI.32218 Amount of Each Receipt this Period									
	FEC ID number of contributing federal political committee.	С			<u> </u>				1	00.00	)			
	Name of Employer (for Individual) GSC SERVICES CORP		upation (for Individual) /IRNMENTAL CONTRACTING		M	emo	tem							
	Receipt For: 2016 Primary	Aggregate	Year-to-Date ▼ 400.00	]										
— B.	Full Name of Individual (Last, First, Middle Init AUCKLAND, KELLIANNE, , ,		Date o	f Re	eceipt									
	Mailing Address 14181 DARTS DR				10 <sup>M</sup>	/	04	/ Y	201		7			
	City	State	Zip Code		Trans	acti	ion ID :	SA11AL	32255					
	FENTON	MI	48430-0000		Amoun	t of	Each R	eceipt th	nis Per	riod				
	FEC ID number of contributing federal political committee.	С			50.00									
	Name of Employer (for Individual) PROFESSIONAL INSURANCE		upation (for Individual) URANCE AGENT		Memo Item									
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 50.00	]										
— c.	Full Name of Individual (Last, First, Middle Init BERGMAN, SYLVIA, , ,	ial) or Full O	rganization Name		Date o	f Re	eceipt							
	Mailing Address 209 S. MCCANN ST.				<sup>M</sup> 10	1	D D 17	/ Y	y 201					
	City KOKOMO	State IN	Zip Code 46901-0000					SA11AI. eceipt th						
	FEC ID number of contributing federal political committee.	С			<u> </u>		,	y		50.00	)			
	Name of Employer (for Individual) RETIRED		upation (for Individual) DKER/AUTHOR		M	emo	o Item							
	Receipt For: 2016 Primary X General Other (specify)	Aggregate	Year-to-Date ▼ 200.00	]										
⊢	UBTOTAL of Receipts This Page (optional)					_	, .	· ·	2	00.00				

SCHEDULE A (FEC Form 3X)	
ITEMIZED RECEIPTS	

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 OF 33 (check only one)								
	for each category of the Detailed Summary Page	Image: Concert only one)       Image: Concert only only only only only only only only								
	nd Statements may not be sold or used by any pe the name and address of any political committee									
NAME OF COMMITTEE (In Full) American Horizons PAC										
Full Name of Individual (Last, First, Middle <b>A.</b> BERTUCCIO, JEFF, , ,	e Initial) or Full Organization Name	Date of Receipt								
Mailing Address 17 MAYFAIR TERRACE		10 / D D / Y Y Y Y Y 2016								
City COMMACK	StateZip CodeNY11725-0000	Transaction ID : SA11AI.32243 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	100.00								
Name of Employer (for Individual) ALARM TECH SECURITY	Occupation (for Individual) OWNER	Memo Item								
Receipt For: 2016 Primary <b>X</b> General Other (specify) <b>V</b>	Aggregate Year-to-Date ▼ 100.00	_								
Full Name of Individual (Last, First, Middle B. BLAHA, STACI, , ,	e Initial) or Full Organization Name	Date of Receipt								
Mailing Address 15955 NW 130TH STREE	Т	M M / D D / Y Y Y Y 10 12 2016								
City PLATTE CITY	StateZip CodeMO64079-0000	Transaction ID : SA11AI.32378 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	С	200.00								
Name of Employer (for Individual) STACI R BLAHA DDS PC	Occupation (for Individual) DENTIST	Memo Item								
Receipt For: 2016	Aggregate Year-to-Date ▼	-								
Other (specify)	1200.00									
Full Name of Individual (Last, First, Middle C. BLUM, KATHY, , ,	Initial) or Full Organization Name	Date of Receipt								
Mailing Address 2003 TRAILPINE CT		10 / D D / Y Y Y Y 10 16 2016								
City NORMAN	StateZip CodeOK73072-0000	Transaction ID : SA11AI.32391 Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.	C	250.00								
Name of Employer (for Individual) PILATES FITNESS CENTER	Occupation (for Individual) PILATES INSTRUCTOR	Memo Item								
Receipt For: 2016 Primary X General Other (specify)	Aggregate Year-to-Date ▼ 1005.00									
SUBTOTAL of Receipts This Page (optional	) ▶	550.00								
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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	American Horizons PAC									_								
Α.	Full Name of Individual (Last, First, Middle Init BRADLEY, ROY, , ,	ial) or Full O	Organ	ization Name		D	ate of	Re	ceipt									
	Mailing Address 2030 KINGS VALLEY DRIVE				10 03 2016													
	City	State		Zip Code		Transaction ID : SA11AI.32232												
	LAWRENCEVILLE	GA		30043-0000	_	Aı	mount	of	Each	Re	eceipt th	nis F	Period					
	FEC ID number of contributing federal political committee.	С			50.00													
	Name of Employer (for Individual) SELF EMPLOYED			on (for Individual) ARE ARCHITECT		Memo Item												
	Receipt For: 2016 Aggregate Year-to-Date ▼																	
	Primary X General Other (specify) ▼		40	50.00														
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name																		
	BUECHLEY, SARAH, , ,		D	ate of	Re	ceipt												
Mailing Address BUECHLEY@AOL.COM										10 / Y Y Y Y 2016								
	City	State		Zip Code			Trans	acti	on ID	: :	SA11AI.	322	50					
	KNOXVILLE	TN		37922-0000	_	Aı	mount	of	Each	Re	eceipt th	nis F	Period					
	FEC ID number of contributing federal political committee.	С						50.00										
	Name of Employer (for Individual) SELF		Occupation (for Individual) HOMEMAKER						Item									
	Receipt For: 2016	Aggregate	gregate Year-to-Date ▼															
	Primary x General Other (specify) ▼		50.00															
<u>с.</u>	Full Name of Individual (Last, First, Middle Init CAVERLY, GORDON, , ,	ial) or Full O	Organ	ization Name		D	ate of	Re	ceipt									
	Mailing Address 6065 HEARTHSIDE PLACE					I	10 <sup>M</sup>	/	D 1	D 2	/ Y		016 <sup>°</sup>	Y				
	City	State		Zip Code			Trans	acti	ion ID	): (	SA11AI	.323	53					
	GRAND BLANC	MI		48439-0000	_	A	mount	of	Each	Re	eceipt th	nis F	Period					
	FEC ID number of contributing federal political committee.	С			100						100.0	00						
	Name of Employer (for Individual)	Оссі	upati	ion (for Individual)	_	Memo Item												
	MID-STATE CONSULTANTS INC.			IAL VICE-PRESIDENT														
	Receipt For: 2016	Aggregate	Yea	r-to-Date ▼														
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	Other (specify) 315.00																	
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SCHEDULE A	(FEC Form 3X)
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Mailing Address 4950 MIDWAY LN				10 08 / Y Y Y Y 2016									
City	Zip Code		Transaction ID : SA11AI.32350										
LAONA	54541-0000		Amount	of	Each F	Receipt t	his Pe	eriod					
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Name of Employer (for Individual) FCP	upation (for Individual)		Me	emo	Item								
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Full Name of Individual (Last, First, Middle Initial) or Full Organization Name         B. COLLINS, ED, , ,													
Mailing Address 1688 SIERRA WOODS			10 <sup>M</sup>	/	18		201	ү 6	Ŷ				
City	State	Zip Code		Trans	acti	on ID :	SA11A	.32434	4				
RESTON	VA	20194-0000	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.	С			50.00									
Name of Employer (for Individual) ORACLE		upation (for Individual) LES REP		Memo Item									
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Other (specify)		200.00											
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Mailing Address 7418 PAXTON ROAD				<sup>M</sup> 10	/	D 04		201		Y			
City	State	Zip Code		Trans	act	ion ID :	SA11A	1.3228	6				
FALLS CHURCH	VA	22043-0000		Amount	of	Each F	Receipt t	his Pe	eriod				
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or	for commercial purposes, other than using the	e name and a	address of any political co	mmittee to so	licit contrib	outions fr	om such	committ	ee.				
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	Mailing Address 31 BLACK FAWN LANE				10 <sup>M</sup> /	D D D 03	/ Y	y y 2016	Y				
	City	State CO	Zip Code		Transact	-							
	WESTCLIFFE		81252-0000	/	Amount of	Each Re	eceipt this	Period					
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	Name of Employer (for Individual)	Occ	upation (for Individual)		Memo	o Item							
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	Primary X General	33 - 3											
	Other (specify) <b>v</b>	L	50.	00									
B.	Full Name of Individual (Last, First, Middle In E, JOSEPH, , ,		Organization Name		Date of Re	eceipt							
	Mailing Address 7502 CHERRY BROOK COU	RT			10 <sup>M</sup> /	D D 08	/ Y	ү ү 2016	Y				
	City	State	Zip Code		Transaction ID : SA11AI.32341								
	SUGAR LAND	TX	77479-0000	/	Amount of	Each Re	eceipt this	Period					
	FEC ID number of contributing federal political committee.	С			50.00								
	Name of Employer (for Individual) A&I FASTENER		cupation (for Individual) DUSTRIAL SALES		Memo Item								
	Receipt For: 2016	Aggregate	Year-to-Date <b>V</b>										
	Primary ★ General Other (specify) ▼		, 200.	00									
<u></u> с.	Full Name of Individual (Last, First, Middle In FOLKERTS, PATTI, , ,	itial) or Full C	Organization Name		Date of Re	eceipt							
	Mailing Address 368 RIDDLE RD.				10 <sup>M</sup> /	D D D 03	/ Y	y y 2016	Y				
	City	State	Zip Code		Transact	ion ID:	SA11AI.3	2278					
	CEDAR CREEK	ТХ	78612-0000	/	Amount of	Each Re	eceipt this	Period					
	FEC ID number of contributing federal political committee.	С			100.00								
	Name of Employer (for Individual) SELF		upation (for Individual) BLISHER		Memo	o Item							
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SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

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	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) American Horizons PAC														
Α.			Organizat	ion Name		Date c	of Red	ceipt							
	Mailing Address P O BOX 1006 EXETER CA.93	3221-1006	Zin	Code	10 / D D / Y Y Y Y Y 2016										
	City EXETER	CA	· · ·	3221-0000	_	Transaction ID : SA11AI.32248         Amount of Each Receipt this Period									
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	Name of Employer (for Individual) SELF		•	(for Individual) IENT WIND MACHINES.		N	/lemo	ltem							
	Receipt For:       2016         Primary       ✗         Other (specify) ▼	Aggregate	Year-to-	Date ▼ 200.00											
В.	Full Name of Individual (Last, First, Middle Initia FULLARD, JOHN, , , Mailing Address 4766 GUTHRIE CEMETERY RO	_	Date c	of Red	ceipt		• Y • Y	V							
	City	State		Code	_	10 09 2016 Transaction ID : SA11AI.32361									
	LOGANVILLE FEC ID number of contributing federal political committee.	C	3(	0052-0000		Amount of Each Receipt this Period									
	Name of Employer (for Individual) EARTHWISE INDUSTRIES INC		•	(for Individual) OWNER		Memo Item									
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	Year-to-	Date ▼ 200.00											
<u>с</u> .	Full Name of Individual (Last, First, Middle Initia GAMPPER, MARK, , ,	al) or Full C	Organizat	ion Name		Date c	of Red	ceipt							
	Mailing Address 5318 CATTAIL CT					<sup>M</sup> 10	/ 1	18		2016	Y				
	City FRISCO	State TX	· · ·	Code 5034-0000					SA11AI		1				
	FEC ID number of contributing federal political committee.	С				Amount of Each Receipt this Period					_				
	Name of Employer (for Individual) DENISON GLASS Receipt For: 2016	CEC	ว	(for Individual)	Memo Item										
	Primary X General Other (specify)	Date ▼ 400.00													
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SCHEDULE A	(FEC Form 3X)
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$\backslash$	American Horizons PAC													
Α.	Full Name of Individual (Last, First, Middle Ini GARLAND, MARLENE, , ,	itial) or Full C	Organization Name		Date o	f Re	eceipt							
	Mailing Address 10 CASA VERDE				M M / D D / Y Y Y Y 10 11 2016									
	City	State	Zip Code		Transaction ID : SA11AI.32373									
	FOOTHILL RANCH	CA	92610-0000	Amount of Each Receipt this Period										
FEC ID number of contributing federal political committee.       C         Name of Employer (for Individual)       C         GARLAND RESTORATION       C				50.00										
			cupation (for Individual)		М	emo	o Item							
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	Primary		200.00	11.										
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В.	Full Name of Individual (Last, First, Middle Ini GEIGER, JENNA, , ,	itial) or Full C	Drganization Name		Date o	f Re	eceipt							
	Mailing Address 1419 N RICHMAN KNOLL	10 / D D / Y Y Y Y Y 2016												
	City	State	Zip Code		Trans	acti	ion ID :	SA11AI.	324	80				
	FULLERTON	CA	92835-0000		Amoun	t of	Each F	Receipt th	nis F	Period				
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	Name of Employer (for Individual) ALIGNMENT HEALTHCARE	Occ CO	cupation (for Individual) 10		Memo Item									
	Receipt For: 2016	Aggregate	Year-to-Date <b>V</b>											
	Primary x General Other (specify) ▼		, 300.00											
<u>с</u> .	Full Name of Individual (Last, First, Middle Ini GLADSHTEYN, OLEG, , ,	itial) or Full C	Drganization Name		Date o	f Re	eceipt							
	Mailing Address 2018 16TH AVE				<sup>M</sup> 10	/	D 16			016 016	Y			
	City	State CA	Zip Code 94080-0000	-				SA11AI						
	SOUTH SAN FRANCISCO		94080-0000	_	Amoun	t of	Each F	Receipt th	nis F	'eriod				
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	Name of Employer (for Individual) EVERLAST POWER EQUIPMENT INC	cupation (for Individual) D		Memo Item										
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SCHEDULE A	(FEC Form 3X)
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Α.	Full Name of Individual (Last, First, Middle Initi GOBLE, JON, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 915 CLASSON LANE				<sup>M</sup> 10	1	07	) / Y	۲ 20	16	Ŷ		
City State BEECH GROVE IN			Zip Code 46107-0000					SA11AI. Receipt th					
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	Name of Employer (for Individual) SELF		pation (for Individual) RATION TECHNICIAN		М	emo	o Item						
	Receipt For: 2016 Primary ¥ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	]									
в.	Full Name of Individual (Last, First, Middle Initi GREENE, CRAIG, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 900 N PROSPECT AVE.				<sup>M</sup> 10	1	D D D 14	) / Y	y 201	6 6	Ŷ		
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	Name of Employer (for Individual) MCGOVERN & GREENE LLP	Occu CPA	upation (for Individual)		Memo Item								
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	Primary     ★     General       Other (specify)     ▼		, 215.00	]									
с.	Full Name of Individual (Last, First, Middle Initi HEDMAN, DANIEL, , ,	al) or Full O	rganization Name		Date o	f Re	eceipt						
	Mailing Address 7842 S EVANSTON AVE				<sup>M</sup> 10	1	D 18		201	6 6	Y		
	City TULSA	State OK	Zip Code 74136-0000					SA11AI					
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	Name of Employer (for Individual) PATRIOT GRILL	Occu OWN	ipation (for Individual) IER		M	em	o Item						
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۹.	Full Name of Individual (Last, First, Middle Initia	l) or Full C	Drgai	nization Name	[	Date o	of R	lec	ceipt						
	Mailing Address 5204 COFFEETREE DRIVE				10 / D D / Y Y Y Y 2016										
	City	State		Zip Code 27613-0000	Transaction ID : SA11AI.32443										
	RALEIGH	NC	Amount of Each Receipt this Period												
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	Name of Employer (for Individual) SIERRA PACIFIC								Item						
	Receipt For: 2016 Aggregate Year-to-Date ▼														
	Full Name of Individual (Last, First, Middle Initia JACOPI, BELLE, , ,	ll) or Full C	Drgar	nization Name		Date (	of R	lec	ceipt						
	Mailing Address 95 PACHECO CREEK DR.							/	08	1	Y	y y 2016	Y		
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	Scottsdale	AZ		85255-0000	/	Amou	nt of	fE	Each Re	eceipt	this	Period			
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	ame of Individual (Last, First, Middle Initia ER, DAVE, , ,	al) or Full Or	ganization Name		Date of	Re	ceipt	t								
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City FORE	ST	ů – Elektrik					-		<b>A11AI.:</b> ceipt th							
	D number of contributing I political committee.						100.00									
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	ame of Individual (Last, First, Middle Initia OBERT, , ,	al) or Full Org	ganization Name		Date of	Re	ceipt	 t								
Mailing	Address PO BOX 368				<sup>M</sup> 10	/		08	/ Y	201		Y				
City DE KA	N B	State TX	Zip Code						A11AI.							
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			pation (for Individual) RAL DIRECTOR - PAST NFDA	P	Memo Item											
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$\geq$	American Horizons PAC												
Α.	Full Name of Individual (Last, First, Middle Initial LABROSSE, JANICE, , ,	) or Full C	Drganization Name	Date of Receipt									
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	City WICKENBURG	State AZ	Zip Code 85390-0000					SA11AI. eceipt th					
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	Name of Employer (for Individual) HORSPITALITY RV RESORT AND BOARDING S	cupation (for Individual) /NER		Me	emo	Item							
	Receipt For: 2016 Primary ★ General Other (specify) ▼	e Year-to-Date ▼ 100.00	]										
в.	Full Name of Individual (Last, First, Middle Initial LACKEY, DONNA, , ,	) or Full C	Drganization Name		Date of	Re	ceipt						
	Mailing Address 301 EAST HIGHWAY 5 POBOX			10 <sup>M</sup>	1	08	/ Y	ې 202	ү 16	Ŷ			
		Zip Code					SA11AI.		-				
	ROOPVILLE           FEC ID number of contributing           federal political committee.	GA	30170-0000		Amount of Each Receipt this Period								
	Name of Employer (for Individual) CARROLL CHAMBER		cupation (for Individual) NIOR VP		Memo Item								
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 200.00	]									
С.	Full Name of Individual (Last, First, Middle Initial LADD, DAVID, , ,	) or Full C	Drganization Name		Date of	Re	ceipt						
	Mailing Address 786 HANOVER ST	1			<sup>M</sup> 10	1	D D 18	/ Y	20 <sup>2</sup>	16 <sup>°</sup>	Y		
	City HANOVER	State MA	Zip Code 02339-0000					SA11AI.					
	FEC ID number of contributing federal political committee.	С					,	J		50.0	0		
	Name of Employer (for Individual) COMMONWEALTH OF MASSACHUSETTS		cupation (for Individual) RECTOR HAZARDOU SMATERIA	LS	Memo Item								
	Receipt For: 2016 Primary X General Other (specify)	Primary K General											
s	UBTOTAL of Receipts This Page (optional)			<u> </u>			, .	. ,		200.00	0		
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SCHEDULE A	(FEC Form	3X)
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	NAME OF COMMITTEE (In Full)												
$\rangle$	American Horizons PAC												
Α.	Full Name of Individual (Last, First, Middle Initi LAWRENCE, EDITH, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 2489 COUNTY ST.				<sup>M</sup> 10	1	08	) / Y	۲ 20	ү 16	Y		
	City DIGHTON	State MA	Zip Code 02715-0000					SA11AI. Receipt th					
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	Name of Employer (for Individual) RETIRED		upation (for Individual) FIRED		М	emo	o Item						
	Receipt For: 2016 Primary	Aggregate	Year-to-Date ▼ 400.00	]									
В.	Full Name of Individual (Last, First, Middle Initi LUKASAVICH, WILLIAM, , ,	ial) or Full O	rganization Name		Date of	f Re	eceipt						
	Mailing Address 205 WEST BLEEKER ST. APT	. 2			10 <sup>M</sup>	1	D D D 17	/ Y	201	16	Y		
	City	State	Zip Code		Trans	act	ion ID :	SA11AI.	32388	8			
ASPEN CO			81611-0000		Amoun	t of	Each R	leceipt th	nis Pe	riod			
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	Name of Employer (for Individual) RETIRED		upation (for Individual) TIRED		Memo Item								
	Receipt For: 2016         Primary       ▼         Other (specify)       ▼	Aggregate	Year-to-Date ▼ 205.00	]									
	Full Name of Individual (Last, First, Middle Initi LYLE, JOHN, , ,	ial) or Full O	rganization Name	_	Date o	f Re	eceipt						
	Mailing Address 11217 BLUE RIVER RD				10 <sup>M</sup>	1	08	) / Y	201	16	Ŷ		
	City KANSAS CITY	State MO	Zip Code 64131-0000					SA11AI					
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	, ,		50.00	0		
	Name of Employer (for Individual) SELF		upation (for Individual) ERINARIAN		Memo Item								
	Receipt For: 2016 Primary X General Other (specify)	Aggregate	Year-to-Date ▼ 215.00	1									
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SCHEDULE A	(FEC Form 3X)
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$\left  \right $	American Horizons PAC														
۹.	Full Name of Individual (Last, First, Middle In MAHALL, KATHLEEN, , ,	itial) or Full O	rganization Name		Date of	Re	ecei	pt							
	Mailing Address 23124 ROBERTS RUN				10 <sup>M</sup>	1		02			016	Y			
	City	State	Zip Code		Transaction ID : SA11AI.32442										
		ОН	44140-0000	Amount of Each Receipt this Period											
	FEC ID number of contributing iederal political committee.	С		100.00 Memo Item											
	Name of Employer (for Individual) RETIRED		upation (for Individual) TIRED												
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	Mailing Address 27392 Tumbleweed Tr.		м м 10	/	ľ	19	1 ′ Г		) 16	Y					
	City	Zip Code		Trans	acti	ion	ID : 5	SA11A	.322	19					
	Valley Center	CA	92082-0000		Amount	of	Ea	ch R	eceipt t	his F	Period				
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	Name of Employer (for Individual) ARTISTIC ILLUMINATION		upation (for Individual) SINESS OWNER		Me	emc	o Ite	em							
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	Full Name of Individual (Last, First, Middle In NELSON, GREG, , ,	itial) or Full O	rganization Name		Date of	Re	ecei	pt							
	Mailing Address 731 SOUTH FORTH AVENU	E			<sup>M</sup> 10	/	Γ	18	/		016	Y			
	City	State AZ	Zip Code						SA11A						
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	Name of Employer (for Individual) SELF		upation (for Individual) F CART DEALER		Memo Item										
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	Other (specify)		215.00												
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Α.	Full Name of Individual (Last, First, Middle Init O'REILLY, JAMES, , ,	ial) or Full C	Drga	nization Name		Da	ate of	Re	ceipt								
	Mailing Address 70-26 88 STREET																
	City	State		Zip Code		Transaction ID : SA11AI.32358											
	GLENDALE	NY		11385-0000	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С			100.00												
	Name of Employer (for Individual) YERMANS IRISH PUB		upa /NEI	tion (for Individual)	Memo Item												
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	Mailing Address 1830 FLORINE COURT		7	м м 10	/		D 17	/ Y		) 216	Y						
	City	State		Zip Code	Transaction ID : SA11AI.32396												
	SAINT CHARLES	MO		63303-0000	Amount of Each Receipt th								Period				
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	Name of Employer (for Individual) AMOSO PROPERTIES		•	tion (for Individual) RTY MANAGEMENT			Me	emo	Item	ı							
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	Full Name of Individual (Last, First, Middle Init OVERTON, GRETCHEN, , ,	ial) or Full C	Drga	nization Name		Da	ate of	Re	ceipt								
	Mailing Address 411 WALNUT ST. #10800					L	10 <sup>M</sup>	1		18	JL	20	016 <sup>°</sup>	Y			
	City	State		Zip Code		-	Trans	acti	ion II	):	SA11AI	.322	11	_			
	GREEN COVE SPRINGS	FL		32043-0000		Ar	nount	of	Each	I Re	eceipt th	nis F	Period				
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SCHEDULE A	(FEC Form 3X)
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	NAME OF COMMITTEE (In Full) American Horizons PAC																			
۹.	Full Name of Individual (Last, First, Middle Ini PHILIPS, MARSHA, , ,		Orga	nization Name		Date of	f Re	ecei	ipt											
	Mailing Address 1904 METAIRIE HEIGHTS A		м м 10	/		06	/ Y		016	Y										
	City METAIRIE	Transaction ID : SA11AI.32483         Amount of Each Receipt this Period																		
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	Name of Employer (for Individual) SELF		•	tion (for Individual) OLOGIST		M	emc	o Ite	em											
	Receipt For: 2016 Primary	ar-to-Date ▼ 315.00																		
	Full Name of Individual (Last, First, Middle Ini PIPPIN, KEN, , ,	itial) or Full O	Orga	nization Name		Date of	f Re	ecei	ipt											
Mailing Address 28 LITTLE VINE RD								10 / D D / Y Y Y Y 2016												
	City HILLSVILLE	LLE State Zip Code 24343-0000							Transaction ID : SA11AI.32417 Amount of Each Receipt this Period											
	FEC ID number of contributing federal political committee.	С						- <b>J</b>				500.0	0							
	Name of Employer (for Individual) CAROLINA SOUTHERN RAILROAD		•	tion (for Individual) DENT		M	emc	o Ite	em											
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	Yea	ar-to-Date ▼ 2000.00																
).	Full Name of Individual (Last, First, Middle Ini POWERS, KENNETH, , ,	itial) or Full O	Orga	nization Name		Date of	f Re	ecei	ipt											
	Mailing Address 104 WAVERLY PLACE					<sup>M</sup> 10	1		08	/ Y		)16 )	Y							
	City LEBANON	State TN		Zip Code 37087-0000	A					SA11AI										
	FEC ID number of contributing federal political committee.	С						y		, y		100.0	0							
	Name of Employer (for Individual) COMMERCIAL REALTY SERVICES	tion (for Individual) STATE DEVELOPER	Memo Item																	
	Receipt For: 2016 Primary X General Other (specify)	Aggregate	Yea	ar-to-Date ▼ 400.00																
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/																
Α.	Full Name of Individual (Last, First, Middle Init R., THOMAS, , ,	ial) or Full C	rganization Name	Date of Receipt												
	Mailing Address 1712 HERSCHEL				M M		D			Y	Y					
	City	State	Zip Code	10 13 2016 Transaction ID : SA11AI.32382												
	ARLINGTON	TX	76010-0000	Amount of Each Receipt this Period												
	FEC ID number of contributing federal political committee.	С						-		50.0	00					
	Name of Employer (for Individual) PRINCE OF PEACE HOUSE OF PRAYER		upation (for Individual) STOR		M	em	o Item									
	Receipt For: 2016	Aggregate	Year-to-Date V													
	Primary		215.00	]												
В.	Full Name of Individual (Last, First, Middle Init REISS, UZZI, , ,	ial) or Full C	rganization Name		Date of	f Re	eceipt									
	Mailing Address 414 NORTH CAMDEN SUIT 7	750			<sup>M</sup> 10	1	09			)16	Y					
	City	State	Zip Code		Transaction ID : SA11AI.32346 Amount of Each Receipt this Period											
	BEVERLY HILLS	CA	90210-0000	/												
	FEC ID number of contributing federal political committee.	С								250.0	00					
	Name of Employer (for Individual) SELF		upation (for Individual) -ANTI AGING MEDICINE		M	emo	o Item									
	Receipt For: 2016	Aggregate	Year-to-Date V													
	Primary     ✔     General       Other (specify)     ▼		1000.00	]												
С.	Full Name of Individual (Last, First, Middle Init ROBISON, FRANK, , ,	ial) or Full C	rganization Name		Date of	f Re	eceipt									
	Mailing Address PO BOX 1327				10 <sup>M</sup>	1	18			) 16	Y					
	City	State	Zip Code		Trans	act	tion ID :	SA11AI	.324	08						
	SCAPPOOSE	OR	97056-0000	/	Amount	t of	Each F	Receipt th	nis F	Period						
	FEC ID number of contributing federal political committee.	С					y	9		250.0	00					
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ITEMIZED RECEIPTS			Use separate schedule(s)	(cl	(check only one)										
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$\rangle$	American Horizons PAC														
Α.		ial) or Full O	rganization Name		Date c	of Re	eceipt								
	Mailing Address 2322 NW 26TH PL				10 / Y Y Y Y Y 2016										
	City CAPE CORAL	State FL	Zip Code 33993-0000		Transaction ID : SA11AI.32367           Amount of Each Receipt this Period										
	FEC ID number of contributing federal political committee.	С													
	Name of Employer (for Individual) RETIRED		upation (for Individual) IRED		N	lem	o Item								
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	1											
	Full Name of Individual (Last, First, Middle Initi STEWART, SHANTANA, , ,	ial) or Full O	rganization Name		Data a	f D/	aggint								
ь.	Mailing Address 5515 HOWARD LANE				Date o		13		201	16	Ŷ				
	City	State	Zip Code		Trans	sact	ion ID :	SA11AL	3238	3					
	GLOUCESTER	VA	23061-0000		Amoun	nt of	Each F	Receipt th	nis Pe	eriod					
	FEC ID number of contributing federal political committee.	С		100.00											
	Name of Employer (for Individual) NEAL' HUNTING&FISHING SUPPLIES		upation (for Individual) NER		Memo Item										
	Receipt For: 2016 Primary ★ General Other (specify) ▼	Aggregate	Year-to-Date ▼ 400.00	]											
<u> </u>	Full Name of Individual (Last, First, Middle Initi STJACQUES, JENNIFER, , ,	ial) or Full O	rganization Name		Date o	of Re	eceipt								
	Mailing Address 489 BLUE HERON CT				10	/	D 13		201	16 <sup>°</sup>	Y				
	City WESTERVILLE	State OH	Zip Code 43082-0000					<b>SA11AI</b> Receipt th							
	FEC ID number of contributing federal political committee.	С			<u> </u>		y .	y		75.0	0				
	Name of Employer (for Individual) EXPRESS		ipation (for Individual) HNICAL DESIGNER		N	1em	o Item								
	Receipt For: 2016 Primary X General Other (specify)	Year-to-Date ▼ 315.00	1												
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SCHEDULE A	(FEC Form 3X)
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Α.	Full Name of Individual (Last, First, Middle Init THYFAULT, PAULA, , ,	nization Name	Date of Receipt													
	Mailing Address 655 MICHIGAN AVE NE					<sup>м</sup> 10		/	03	/ Y		016	Y			
	City	State		Zip Code	Transaction ID : SA11AI.32196											
	WASHINGTON	DC		20017-0000	_	Amou	nt o	fE	Each R	eceipt t	his F	Period				
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В.	Full Name of Individual (Last, First, Middle Init WEAVER, JOAN, , ,	ial) or Full C	Orga	nization Name		Date	of R	lec	ceipt							
	Mailing Address 3446 OLD SALEM ROAD	M M / D D / Y Y Y Y														
		1	10 09 2016													
	City	State		Zip Code	Transaction ID : SA11AI.32491											
	PAMPLICO	SC		29583-0000	Amount of Each Receipt this Period											
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	Name of Employer (for Individual) L DEAN WEAVER CO LLC		•	tion (for Individual) /AY/HEAVY CONSTRUCTION	 I		Mem	10	ltem							
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	Primary General			250.00												
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<u>с</u> .	Full Name of Individual (Last, First, Middle Init WIEFFERING, MICHAEL, , ,	ial) or Full C	Orga	nization Name		Date	of R	lec	ceipt							
	Mailing Address 2570 PINEVIEW					M 10		/	02	/ Y		016 <sup>°</sup>	Y			
	City	State		Zip Code		Tra	nsac	ctic	on ID :	SA11A	.322	262				
	WEST BLOOMFIELD	MI		48324-0000	_	Amoı	nt o	fE	Each R	eceipt t	his F	Period				
	FEC ID number of contributing federal political committee.			<u> </u>		,	9	,	_	100.0	00					
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	JOHNSON CONTROLS	OJE	CT MANAGER													
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SCHEDULE A	(FEC Form 3X)
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American Horizons PAC												
Full Name of Individual (Last, First, M ZEISLOFT, CHARLES, , , Mailing Address 1699 CROWN POINT	-	rganization Name	Date of Receipt									
City	State	Zip Code	10 12 2016 Transaction ID : SA11AI.32376									
THOROFARE	NJ	08086-0000	Amount of Each Receipt this Period									
FEC ID number of contributing federal political committee.	С		250.00									
Name of Employer (for Individual) ZEISLOFT TRUCKING LLC		upation (for Individual) NER	Memo Item									
Receipt For: 2016 Primary	Aggregate	Year-to-Date ▼ 1015.00	]									
Full Name of Individual (Last, First, M B.	iddle Initial) or Full C	rganization Name	Date of Receipt									
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ITEMIZED DISBURSEMENTS       Use separate schedule(s) re cach category of the Detailed Summary Page       Charles and yong and Page base base base base base base base bas	SCHEDULE B (FEC Form 3X)		arata sobodula(c)				NUMBE	R:			PA	GE 2	25 OF	33					
ar for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee          NAME OF COMMITTEE (in Fuil)         A. ActiveCampaign, Inc         Mailing Address 222 South Riverside Plaza         Suite 810         City         Chicago         Candidate Name         Candidate Name         Office Sought:       House         Disbursement         State:         Disbursement         Distrement         State:         Distrement         Prim	ITEMIZED DISBURSEMENTS	for each	category of the	(c	<b>X</b> 2	1b	22	,											
American Horizons PAC         ActiveCampaign, Inc         Mailing Address 4223 South Riverside Plaza Suite 810         City Chicago       State         City Chicago       State         Cardidate Name       Dot         Candidate Name       Dot         Candidate Name       Disbursement For: 2016         Seate       Disbursement For: 2016         Seate       Disbursement For: 2016         President       Other (specify) ▼         Mailing Address 4023 Kennett Pike #37689       Disbursement For: 2016         City Withington       Disbursement For: 2016         Perioder of Disbursement #37689       Disbursement For: 2016         City Withington       Disbursement For: 2016         Perioder of Disbursement #37689       Disbursement For: 2016         City Withington       Disbursement For: 2016         President       Disbursement For: 2016	or for commercial purposes, other than using the na																		
A. ActiveCampaign, Inc       Date of Disbursement         Mailing Address       Suite \$10         City       State         City       State         Purpose of Disbursement       001         Candidate Name       001         Office Sought:       House         President       Disbursement For: 2016         State:       Disbursement For: 2016         Office Sought:       Senate         President       Other (specify)         State:       Disbursement For: 2016         Balance       Other (specify)         Purpose of Disbursement       001         State:       Disbursement For: 2016         Mailing Address:       4023 Kennett Pike         #57569       State         City       State         Diffice Sought:       House         Disbursement       C:         Logo/Graphic Design       Other (specify)         Candidate Name       Disbursement For: 2016         Office Sought:       House       Disbursement For: 2016         Office Sought:       House       Disbursement For: 2016         State       Disbursement       202         City       Mailing Address 4023 Kennett Pike       100																			
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Chicago       IL       60606         Purpose of Disbursement CRM Software       001         Candidate Name       001         Office Sought:       House         Disbursement For:       2016         State:       Disbursement Ion:         State:       Disbursement For:         State:       District:         Office Sought:       House         President       Other (specify) ▼         Mailing Address       4023 Kennett Pike         #57569       State         Office Sought:       House         Disbursement       Cot         Logo/Graphic Design       Cot         Candidate Name       Disbursement For:         Office Sought:       House         Disbursement For:       2016         President       Disbursement For:         Office Sought:       House         President       Disbursement For:         Office Sought: <td< td=""><td>•</td><td></td><td></td><td></td><td></td><td></td><td colspan="12" rowspan="2">10     11     2016       FEC Identification Number</td></td<>	•						10     11     2016       FEC Identification Number												
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$\backslash$	NAME OF COMMITTEE (In Full)						
	American Horizons PAC						
Α.	Full Name (Last, First, Middle Initial) Stripe, Inc.						Date of Disbursement
	Mailing Address 3180 18th Street Suite 100						10 01 2016
	City	State	Zip Code				FEC Identification Number
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	Mailing Address 3180 18th Street Suite 100						10 / D D / Y Y Y Y 2016
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C.	Full Name (Last, First, Middle Initial) Stripe, Inc.						Date of Disbursement
	Mailing Address 3180 18th Street Suite 100						10 / D D / Y Y Y Y Y 2016
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Α.	Full Name (Last, First, Middle Initial) Stripe, Inc.						Date of Disbursement
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Α.	Full Name (Last, First, Middle Initial) Stripe, Inc.					Date of Disbursement
	Mailing Address 3180 18th Street Suite 100					10 07 2016
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	NAME OF COMMITTEE (In Full) American Horizons PAC															
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$\left \right\rangle$	NAME OF COMMITTEE (In Full)															
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$\left[ \right]$	NAME OF COMMITTEE (In Full)																
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Α.	Full Name (Last, First, Middle Initial) Stripe, Inc.					Date of Disbursement											
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	City San Francisco	State CA	Zip Code 94110			FEC Identification Number											
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	Credit Card Processing Fees			0	03	Transaction ID : SB21B.32522											
	Candidate Name				egory/ /pe												
		7	2016			21.44											
	Senate President	Primary Other (spe	General														
	State: District:		1			Memo Item											
С.	Full Name (Last, First, Middle Initial)					Date of Disbursement											
						M M / D D / Y Y Y Y											
	Mailing Address 3180 18th Street Suite 100	I				10 18 2016											
	City San Francisco	State CA	Zip Code 94110			FEC Identification Number											
	Purpose of Disbursement Credit Card Processing Fees		34110	0	03	C											
	Candidate Name			Cate	egory/ /pe	Transaction ID : SB21B.3252: Amount of Each Disbursement this Period											
	Office Sought: House Disburse	ement For:	2016	.,	, p o	63.23											
	Senate	Primary	<b>x</b> General														
	State: District:	Other (spe	eciiy) ▼			Memo Item											
s	UBTOTAL of Disbursements This Page (optional).				►	122.87											
Ĕ																	
т	OTAL This Period (last page this line number only	/)			)	• [,,]											

SC	HEDULE I	B (FEC Form	3X)						UMBER:			PA	GE	32 OF	33						
ITI	EMIZED DI	SBURSEMENT	S	for each	arate schedule(s) category of the	(c		k only o 21b													
				Detailed	Summary Page			28a	28b		28c	29		30b							
		pied from such Reports purposes, other than us																			
$\backslash$		MITTEE (In Full)																			
	American H	lorizons PAC																			
Α.	Full Name (Last Stripe, Inc.	, First, Middle Initial)							Date of	Disb				V							
	Mailing Address	3180 18th Street Suite 100							10 / 19 / 2016												
	City			State CA	Zip Code				FEC Ide	entific	cation	Number									
	San Francisco Purpose of Disb	ursement		UA	94110	_			C												
	Credit Card Pro	cessing Fees				0	003		Transaction ID : SB21B.32524												
	Candidate Name	9				Cate T	egor ype	y/	Amount of Each Disbursement this Period												
	Office Sought:	House	Disburse	ment For: 2					L	- 7		-		9.43							
	State:	Senate President District:		Primary Other (spec	ify) ▼				Memo Item												
	Full Name (Last																				
B.		,,							Date of		Durser		Y	YY							
	Mailing Address																				
	City			State	Zip Code	_	_		FEC Ide	entific	cation	Number			_						
	Purpose of Disb	ursement							С												
	Candidate Name	)				Cate T	egor ype	y/	Amount of Each Disbursement this Period												
	Office Sought:	House Senate	Disburse	ment For: Primary	General				L	,				-	_						
	State:	President District:		Other (spec	cify)				Mer	no It	em										
<u>с.</u>	Full Name (Last	, First, Middle Initial)							Date of	Dish		ment									
0.										/	D		Y	YY							
	Mailing Address								L												
	City			State	Zip Code				FEC Ide	entific	cation	Number									
	Purpose of Disb	ursement							С												
	Candidate Name	3				Cate	egor ype	y/	Amount	of E	ach I	Disburse	ment	this Pe	riod						
	Office Sought:	House Senate	Disburse	ment For: Primary	General					-7				- 181-	_						
	State:	President District:		Other (spec					Mer	no It	em										
	olaio.									_	_	_	_	_	_						
s	UBTOTAL of Dis	bursements This Page	(optional).					►						9.43							
Т	OTAL This Perio	d (last page this line nu	umber only	)				►				. ,	2	275.08							

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

NAME OF COMMITTEE (In Full) American Horizons PAC	R LINE 24 OF FORM 3X TIFICATION NUMBER ▼ 00619577 D / Y Y Y Y
American Horizons PAC	00619577
Check if 24-hour report 48-hour report New report Amends report filed on 1	D / Y Y Y Y Y
Cartsoft, LLC	stribution/Dissemination
Moiling Addross	D 06 / Y Y Y Y Y Y Y 2016
4th Floor	
City State Zip Code	12000.00
Baltimore MD 21230 Transaction ID : Date of Disburser	SE.32164 ment or Obligation
	D D / Y Y Y Y 06 / 2016
Name of Federal Candidate:	House District:
	Senate State:
Calendar Year-To-Date Per Election for Office Sought 12000.00 Disbursement For: 2016 Other (specifi	Primary  ✔ General
	stribution/Dissemination
Mailing Address	
Amount	
City State Zip Code	
Date of Disburser	ment or Obligation
Purpose of Expenditure Category/ Type	
	House District:
Calendar Year-To-Date Per Election for Office Sought Disbursement For:	Primary General
(a) SUBTOTAL of Itemized Independent Expenditures	12000.00
(a) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL Independent Expenditures	12000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reportin party committee) any political party committee or its agent.	
Hawes, Ian, , , [Electronically Filed] Date 10 26	2016
Signature	