

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Protect the House

ADDRESS (number and street)

PO Box 30844

Check if different than previously reported. (ACC)

Bethesda

MD

20824-0844

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00669622

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

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)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

11 / 27 / 2018

through

M M / D D / Y Y Y Y

12 / 31 / 2018

M M / D D / Y Y Y Y

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 Thomson, Jill, , ,

Signature of Treasurer Thomson, Jill, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 31 / 2019

M M / D D / Y Y Y Y

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Protect the House

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	134.00	2748.00
(b) Total Contribution Refunds (from Line 20(d))	29165.41	29175.41
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	- 29031.41	- 26427.41
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	93544.64	315834.30
(b) Total Offsets to Operating Expenditures (from Line 14).....	2198.50	2198.50
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	91346.14	313635.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	587274.13	
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	

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 3 (Revised 05/2016)

Write or Type Committee Name

Protect the House

Report Covering the Period: From: / To: /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	500.00
(ii) Unitemized.....	134.00	248.00
(iii) TOTAL of contributions from individuals ▶	134.00	748.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	134.00	2748.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	2198.50	2198.50
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	2332.50	4946.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 16

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	93544.64	315834.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	19000.00	19010.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10165.41	10165.41
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	29165.41	29175.41
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	122710.05	345009.71

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	707651.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	2332.50
25. SUBTOTAL (add Line 23 and Line 24).....	709984.18
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	122710.05
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	587274.13

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
Protect the House

A. Full Name (Last, First, Middle Initial)
Strategic Advance Services

Mailing Address 611 Pennsylvania Avenue SE
 Suite 267

City Washington State DC Zip Code 20003-4303

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

Name of Employer Occupation

Receipt For: 2018
 Primary General
 Other (specify) **Non-Election**

Election Cycle-to-Date **2198.50**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2018

Transaction ID : **A30D6AC897DBF4AD79BF**

Amount of Each Receipt this Period
 2198.50

Memo Item
 OFFSET Travel Services, Refund of Excess Payment

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2198.50
TOTAL This Period (last page this line number only).....▶	2198.50

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 16			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Targeted Victory		M M / D D / Y Y Y Y 11 / 27 / 2018	
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number	
City Arlington	State VA	Zip Code 22209-2257	C
Purpose of Disbursement E-Merchant Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	0.45
Office Sought:	House Senate President	Disbursement For: 2018	Transaction ID : B5E9677B733DE4A609C8
		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election	<input type="checkbox"/> Memo Item
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Targeted Victory		M M / D D / Y Y Y Y 12 / 03 / 2018	
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number	
City Arlington	State VA	Zip Code 22209-2257	C
Purpose of Disbursement E-Merchant Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	0.22
Office Sought:	House Senate President	Disbursement For: 2018	Transaction ID : B8B8588993DA5471884E
		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election	<input type="checkbox"/> Memo Item
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
c. Targeted Victory		M M / D D / Y Y Y Y 12 / 04 / 2018	
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number	
City Arlington	State VA	Zip Code 22209-2257	C
Purpose of Disbursement E-Merchant Fees		001	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	1.35
Office Sought:	House Senate President	Disbursement For: 2018	Transaction ID : B0C1FDE933B2941EE9BB
		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election	<input type="checkbox"/> Memo Item
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2.02
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Targeted Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2018
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number C
City Arlington	State VA	Zip Code 22209-2257
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.22
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election	
State: District:	Transaction ID : B8118F4C1A5284D8E884 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. U.S. Treasury		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2018
Mailing Address 1500 Pennsylvania Avenue NW		FEC Identification Number C
City Washington	State DC	Zip Code 20220-0001
Purpose of Disbursement Travel	Category/ Type 002	
Candidate Name		Amount of Each Disbursement this Period 7866.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election	
State: District:	Transaction ID : BEE6F9A3BE00845B4894 <input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Targeted Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2018
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number C
City Arlington	State VA	Zip Code 22209-2257
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election	
State: District:	Transaction ID : B937A8BFA89CF4B49A8B <input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	7867.54
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 16			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Croce, Renee, , ,		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2018
Mailing Address 214 Main Street Suite 404		FEC Identification Number C
City El Segundo	State CA	Zip Code 90245-3803
Purpose of Disbursement Fundraising Consulting	Category/ Type 003	
Candidate Name		Amount of Each Disbursement this Period 3250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID : B647CA6A7A1D64A33838
State: District:	Non-Election	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Targeted Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2018
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number C
City Arlington	State VA	Zip Code 22209-2257
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.45
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID : B8FA9268F72ED4A1C999
State: District:	Non-Election	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Targeted Victory		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2018
Mailing Address 1100 Wilson Blvd 10th Floor		FEC Identification Number C
City Arlington	State VA	Zip Code 22209-2257
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 0.04
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID : B4F1244083CD64BFB8C0
State: District:	Non-Election	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3250.49
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

A. Strategic Advance Services

Full Name (Last, First, Middle Initial)

Mailing Address 611 Pennsylvania Avenue SE
Suite 267

City Washington State DC Zip Code 20003-4303

Purpose of Disbursement Travel Services Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2018
 Primary General
 Other (specify) Non-Election

State: District:

Date of Disbursement 12 / 17 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 60641.66

Transaction ID : BD857D70FF9B64908B21

Memo Item

B. Fls Connect, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 7300 Hudson Blvd

City Saint Paul State MN Zip Code 55128-7141

Purpose of Disbursement Conference Call Service Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2018
 Primary General
 Other (specify) Non-Election

State: District:

Date of Disbursement 12 / 18 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 1688.58

Transaction ID : B0FC9EFE6A0C94B359C5

Memo Item

c. Targeted Victory

Full Name (Last, First, Middle Initial)

Mailing Address 1100 Wilson Blvd
10th Floor

City Arlington State VA Zip Code 22209-2257

Purpose of Disbursement E-Merchant Fees Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2018
 Primary General
 Other (specify) Non-Election

State: District:

Date of Disbursement 12 / 19 / 2018

FEC Identification Number C

Amount of Each Disbursement this Period 1.57

Transaction ID : BDC4481ACFAA540E89B5

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 62331.81

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 16			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Campaign Financial Services			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018		
Mailing Address PO Box 30844					
City Bethesda	State MD	Zip Code 20824-0844	FEC Identification Number C		
Purpose of Disbursement Compliance Consulting		Category/ Type 001	Amount of Each Disbursement this Period 9000.00		
Candidate Name		Transaction ID : B80B3F6421C89449B83D			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) B. Thomson, Jill, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2018		
Mailing Address PO Box 30844					
City Bethesda	State MD	Zip Code 20824-0844	FEC Identification Number C		
Purpose of Disbursement Treasurer Services		Category/ Type 001	Amount of Each Disbursement this Period 500.00		
Candidate Name		Transaction ID : B9B9E511E0140412DB0B			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) c. Targeted Victory			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2018		
Mailing Address 1100 Wilson Blvd 10th Floor					
City Arlington	State VA	Zip Code 22209-2257	FEC Identification Number C		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Amount of Each Disbursement this Period 0.14		
Candidate Name		Transaction ID : BE6AEF85176684A3D9D9			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

SUBTOTAL of Disbursements This Page (optional).....	9500.14
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Targeted Victory			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2018		
Mailing Address 1100 Wilson Blvd 10th Floor			FEC Identification Number C		
City Arlington	State VA	Zip Code 22209-2257	Amount of Each Disbursement this Period 1.57		
Purpose of Disbursement E-Merchant Fees		Category/ Type 001	Transaction ID : BA6E3E3FEFCF54AC6BB6		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election				
State: District:					

Full Name (Last, First, Middle Initial) B. Midfield Aviation, LLC			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2018		
Mailing Address 6544 Highland Road			FEC Identification Number C		
City Waterford	State MI	Zip Code 48327-1607	Amount of Each Disbursement this Period 8000.00		
Purpose of Disbursement Facility Rental		Category/ Type 003	Transaction ID : BD2188B9AE60D43A5A97		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election				
State: District:					

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2018		
Mailing Address PO Box 1			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90053-0001	Amount of Each Disbursement this Period 293.36		
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 001	Transaction ID : BFF387568821B45079CB		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8294.93
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. iDonate			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2018	
Mailing Address 14643 Dallas Parkway Suite 900			FEC Identification Number C	
City Dallas	State TX	Zip Code 75254-8893	Amount of Each Disbursement this Period 75.00	
Purpose of Disbursement Software Service		Category/ Type 001	Transaction ID : B27E53145060241829D2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election			
State: District:				

Full Name (Last, First, Middle Initial) B. Federal Express			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2018	
Mailing Address 942 South Shady Grove Road			FEC Identification Number C	
City Memphis	State TN	Zip Code 38120	Amount of Each Disbursement this Period 140.36	
Purpose of Disbursement Express Mailing		Category/ Type 001	Transaction ID : BEB1778F5325F4AA69ED	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election			
State: District:				

Full Name (Last, First, Middle Initial) C. Golden State Strategy Group			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018	
Mailing Address P.O. Box 661045			FEC Identification Number C	
City Sacramento	State CA	Zip Code 95866-1045	Amount of Each Disbursement this Period 2272.71	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type 003	Transaction ID : BEDE0F9F4AA194BE58EB	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2272.71
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 16			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Golden State Strategy Group			Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2018		
Mailing Address P.O. Box 661045			FEC Identification Number C		
City Sacramento	State CA	Zip Code 95866-1045	Amount of Each Disbursement this Period 2150.00		
Purpose of Disbursement Fundraising Consulting		Category/ Type 003	Transaction ID : B0312BA4247AB4BC2B12		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Non-Election				
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	93519.64

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 16			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Youngkin, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address 9640 Georgetown Pike			FEC Identification Number C		
City Great Falls	State VA	Zip Code 22066	Amount of Each Disbursement this Period 750.00		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Transaction ID : B3773CE778CC5448A9B1		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election				
State: District:					

Full Name (Last, First, Middle Initial) B. Youngkin, Glenn, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address 9640 Georgetown Pike			FEC Identification Number C		
City Great Falls	State VA	Zip Code 22066	Amount of Each Disbursement this Period 750.00		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Transaction ID : BBBD062B4216246EBB88		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election				
State: District:					

Full Name (Last, First, Middle Initial) C. Moskowitz, Cherna, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address 4744 N Bay Road			FEC Identification Number C		
City Miami Beach	State FL	Zip Code 33140	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Transaction ID : BB41FE72B73DE4414A69		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4200.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 16			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. McInerney, Thomas, E., ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address 2 Manitou Court					
City Westport	State CT	Zip Code 06880	FEC Identification Number C		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Amount of Each Disbursement this Period 4800.00		
Candidate Name		Transaction ID : B0AAFE07AC58E4E09A37			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) B. Barenfeld, David, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address PO Box 889					
City Ellwood City	State PA	Zip Code 16117	FEC Identification Number C		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Amount of Each Disbursement this Period 5000.00		
Candidate Name		Transaction ID : BD84B23A3BB8F422E86C			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

Full Name (Last, First, Middle Initial) C. Barenfeld, Wendy, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018		
Mailing Address PO Box 889					
City Ellwood City	State PA	Zip Code 16117	FEC Identification Number C		
Purpose of Disbursement Refund: Contribution Refund		Category/ Type 010	Amount of Each Disbursement this Period 5000.00		
Candidate Name		Transaction ID : B80DDCF5DDE19497F8C4			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election		<input type="checkbox"/> Memo Item		
State: _____ District: _____					

SUBTOTAL of Disbursements This Page (optional).....	14800.00
TOTAL This Period (last page this line number only).....	19000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 16
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Protect the House

Full Name (Last, First, Middle Initial) A. Mustang PAC Inc.		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2018
Mailing Address PO Box 4		FEC Identification Number C C00680322
City Westfield	State IN	Zip Code 46074
Purpose of Disbursement Refund: Contribution Refund		010 Category/ Type
Candidate Name Mustang PAC Inc.		Amount of Each Disbursement this Period 10165.41
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Election	Transaction ID : B6F9ABE7376FF4ECBBF5 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Category/ Type
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	10165.41
TOTAL This Period (last page this line number only).....▶	10165.41