

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **PO BOX 3743**  
Check if different than previously reported. (ACC) **CARMEL IN 46082**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00551853** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  **11** /  **03** /  **2020** in the State of

5. Covering Period  **10** /  **15** /  **2020** through  **11** /  **23** /  **2020**

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 **WUSLICH, JEFF, , ,**

Signature of Treasurer **WUSLICH, JEFF, , ,** [Electronically Filed] Date  **11** /  **25** /  **2020**

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="215570.40"/>	<input type="text" value="215570.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="167986.49"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="93166.62"/>	<input type="text" value="392431.36"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="261153.11"/>	<input type="text" value="608001.76"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="46109.74"/>	<input type="text" value="392958.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="215043.37"/>	<input type="text" value="215043.37"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16500.00	59300.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	16500.00	59300.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	63500.00	292500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	80000.00	351800.00
12. Transfers From Affiliated/Other Party Committees.....	13166.62	40455.36
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	176.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	93166.62	392431.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	93166.62	392431.36

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	31109.74	166958.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	31109.74	166958.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	211000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	15000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	46109.74	392958.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46109.74	392958.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	80000.00	351800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	80000.00	351800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	31109.74	166958.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	176.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	31109.74	166782.39

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. DIBBLEE, ROBERT, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9115 WESTERHOLME WAY  
 City VIENNA State VA Zip Code 22182-2144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NAREIT Occupation (for Individual) SVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 03 / 2020  
**Transaction ID : SA11A.65391**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. MEIJER, HENDRIK, G., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2929 WALKER AVENUE NORTHWEST  
 City GRAND RAPIDS State MI Zip Code 49544-6402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MEIJER SUPERSTORES INC Occupation (for Individual) CO-CHAIRMAN AND CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11A.65642**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**C. MEIJER, MARK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX2284  
 City GRAND RAPIDS State MI Zip Code 49501-2284  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MEIJER SUPERSTORES INC Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11A.65641**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PEARSON, RACHEL, T., ,

Mailing Address 2354 NORTH LINCOLN STREET

City ARLINGTON	State VA	Zip Code 22207-3862
-------------------	-------------	------------------------

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

Name of Employer (for Individual) PEARSON & ASSOCIATES	Occupation (for Individual) FOUNDER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2020

**Transaction ID : SA11A.68622**

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
POARCH BAND OF CREEK INDIANS

Mailing Address 5811 JACK SPRINGS ROAD

City ATMORE	State AL	Zip Code 36502-5025
----------------	-------------	------------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11A.65640**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	16500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ABBOTT LABORATORIES EMPLOYEE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 ABBOTT PARK ROAD  
# D312

City ABBOTT PARK State IL Zip Code 60064-3502

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 15 / 2020  
**Transaction ID : SA11C.63823**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN BAKERS ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 601 PENNSYLVANIA AVENUE N.W.  
SUITE 230

City WASHINGTON State DC Zip Code 20004-2629

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 28 / 2020  
**Transaction ID : SA11C.65638**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191-4326

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 23 / 2020  
**Transaction ID : SA11C.64144**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2941 FAIRVIEW PARK DRIVE  
SUITE 100

City FALLS CHURCH State VA Zip Code 22042-4541

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 15 / 2020

**Transaction ID : SA11C.63824**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. BEAM SUNTORY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 K STREET NW  
SUITE 1040

City WASHINGTON State DC Zip Code 20001-4787

FEC ID number of contributing federal political committee. **C** C00194126

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 29 / 2020

**Transaction ID : SA11C.64868**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. BUILD PAC OF THE NATIONAL ASSOCIATION OF HOME BUILDERS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 15TH STREET NW

City WASHINGTON State DC Zip Code 20005-2899

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 28 / 2020

**Transaction ID : SA11C.65637**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. CIGNA CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 PENNSYLVANIA AVENUE, NW  
SUITE 720

City WASHINGTON	State DC	Zip Code 20004-2626
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11C.65639**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. CVS HEALTH PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1275 PENNSYLVANIA AVENUE, NW  
SUITE 700

City WASHINGTON	State DC	Zip Code 20004-2448
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA11C.65635**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. DELOITTE FEDERAL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 365

City WASHINGTON	State DC	Zip Code 20044-0365
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	21	/	2020

**Transaction ID : SA11C.63826**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. FRESENIUS MEDICAL CARE NORTH AMERICA PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 PENNSYLVANIA AVENUE NW  
SUITE 255

City WASHINGTON State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2020

**Transaction ID : SA11C.65626**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1550 CRYSTAL DRIVE  
SUITE 300

City ARLINGTON State VA Zip Code 22202-4110

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2020

**Transaction ID : SA11C.65643**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. NATIONAL APARTMENT ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4300 WILSON BOULEVARD  
SUITE 400

City ARLINGTON State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2020

**Transaction ID : SA11C.65644**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COM**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8484 WESTPARK DRIVE; SUITE 500

City TYSONS	State VA	Zip Code 22102-3588
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2020

**Transaction ID : SA11C.67999**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. PHARMACEUTICAL CARE MANAGEMENT ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 325 7TH ST, NW  
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20004-2818
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00388819

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	11	/	2020

**Transaction ID : SA11C.68000**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. SEMBRA ENERGY EMPLOYEES POLITICAL ACTION COMMITTEE- FEDERAL**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 488 8TH AVE.

City SAN DIEGO	State CA	Zip Code 92101-7123
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00008748

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2020

**Transaction ID : SA11C.64357**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. TARGET CORPORATION CITIZENS POLITICAL FORUM (TARGETCITIZENS)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1000 NICOLLET MALL  
 TPN-8370  
 City MINNEAPOLIS State MN Zip Code 55403-2542  
 FEC ID number of contributing federal political committee. **C** C00098061  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 15 / 2020  
**Transaction ID : SA11C.63821**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. VALERO PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 696000  
 City SAN ANTONIO State TX Zip Code 78269-6000  
 FEC ID number of contributing federal political committee. **C** C00109546  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11C.65636**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item  
**CONTRIBUTION**

**C. VERIZON COMMUNICATIONS, INC. PAC (VERIZON PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1300 I ST NW, STE 500 EAST  
 ATTN: TAYLOR CRAIG  
 City WASHINGTON State DC Zip Code 20005-  
 FEC ID number of contributing federal political committee. **C** C00186288  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020  
**Transaction ID : SA11C.65634**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT WALPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 SW 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-6209
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2020

**Transaction ID : SA11C.63822**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 805 15TH STREET NW  
SUITE 430

City WASHINGTON	State DC	Zip Code 20005-2273
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		11		2020

**Transaction ID : SA11C.68001**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	63500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YOUNG HOOSIER VICTORY FUND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082-3743
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00634915

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
36888.27

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2020

**Transaction ID : SA12.68493**

Amount of Each Receipt this Period  
13166.62

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. CARDELUCCI, MARK, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 455 CABRILLO TERRACE

City CORONA DEL MAR	State CA	Zip Code 92625-2667
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2020

**Transaction ID : SA.55108.7.2011**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C. NOVOGRADAC, MICHAEL, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address GLORIETTA BOULEVARD

City ORINDA	State CA	Zip Code 94563-
----------------	-------------	--------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
NOVOGRADAC AND COMPANY LLP REAL ESTATE CPA

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2020

**Transaction ID : SA.62807.7.2011**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13166.62
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 23
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YATES, JOHN, A., , SR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 100

City ARTESIA	State NM	Zip Code 88211-0100
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2020

**Transaction ID : SA.64924.7.2011**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**B. SANOFI US INC. EMPLOYEES PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 CORPORATE DRIVE

City BRIDGEWATER	State NJ	Zip Code 08807-1265
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	08	/	2020

**Transaction ID : SA.56627.7.2011**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

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

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	13166.62



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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANEDOT**

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 22 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1129  
Amount of Each Disbursement this Period

[REDACTED] 200.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT**

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 27 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1129  
Amount of Each Disbursement this Period

[REDACTED] 200.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT**

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 05 / 2020

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1131  
Amount of Each Disbursement this Period

[REDACTED] 40.30

Memo Item

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

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

[REDACTED] 440.90

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AVIATION TRANSPORTATION**

Mailing Address 93716 ORCA LANE

City NORTH BEND State OR Zip Code 97459

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 11 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1131!  
Amount of Each Disbursement this Period  
804.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BANDON DUNES**

Mailing Address 57744 ROUND LAKE RD

City BANDON State OR Zip Code 97411

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 30 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1130!  
Amount of Each Disbursement this Period  
260.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BANDON DUNES**

Mailing Address 57744 ROUND LAKE RD

City BANDON State OR Zip Code 97411

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 02 / 2020

FEC Identification Number

C  
Transaction ID : SB21B.I1131  
Amount of Each Disbursement this Period  
325.00

Memo Item

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

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

1389.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address 502 MONROE ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1129!</b> Amount of Each Disbursement this Period 1515.33
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 11 / 2020
Mailing Address 502 MONROE ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1131!</b> Amount of Each Disbursement this Period 1500.00
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. EC CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address PO BOX 40323		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1130</b> Amount of Each Disbursement this Period 19250.00
City WASHINGTON	State DC	Zip Code 20016-2705
Purpose of Disbursement FINANCE CONSULTING		Category/ Type
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

22265.33

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. LATE HARVEST KITCHEN</b>		Date of Disbursement MM / DD / YYYY 11 / 09 / 2020
Mailing Address 8605 RIVER CROSSING BOULEVARD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1132</b> Amount of Each Disbursement this Period [REDACTED] 756.40
City INDIANAPOLIS	State IN	Zip Code 46240
Purpose of Disbursement FOOD/BEVERAGE		Category/Type [REDACTED]
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address 5750 CASTLE CREEK PKWY N DR SUITE 367		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I11302</b> Amount of Each Disbursement this Period [REDACTED] 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/Type [REDACTED]
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. PEARSON &amp; ASSOCIATES</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2020
Mailing Address 1111 19TH STREET NORTHWEST SUITE 1100		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1130</b> Amount of Each Disbursement this Period [REDACTED] 908.40
City WASHINGTON	State DC	Zip Code 20036
Purpose of Disbursement TRAVEL		Category/Type [REDACTED]
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) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 6664.80
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. SOCKO STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 4323 CATHEDRAL AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I1130I

Amount of Each Disbursement this Period: 280.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 280.00

**TOTAL** This Period (last page this line number only)..... ▶ 31040.03

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

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. GEORGIANS FOR KELLY LOEFFLER**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 11623

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name LOEFFLER, KELLY, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement: 11 / 11 / 2020

FEC Identification Number: C00729608  
Transaction ID : SB23.I11320  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. PERDUE FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 12077

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name PERDUE, DAVID, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: GA District:

Date of Disbursement: 11 / 11 / 2020

FEC Identification Number: C00547570  
Transaction ID : SB23.I11321  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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

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

10000.00
10000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. HUSTON FOR STATE REPRESENTATIVE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1461

City INDIANAPOLIS State IN Zip Code 46206

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB29.I11273

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00