

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**
Liberty for All Action Fund

ADDRESS (number and street) PO Box 25394
Check if different than previously reported. (ACC) Alexandria VA 22313

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00514653 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 M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Marston, Christopher, M, ,
Type or Print Name of Treasurer

Signature of Treasurer Marston, Christopher, M, , [Electronically Filed] Date 07 / 30 / 2017

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**

Write or Type Committee Name

Liberty for All Action Fund

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="2017"/>		<input type="text" value="30648.85"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="30648.85"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="513.21"/>	<input type="text" value="513.21"/>
(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="31162.06"/>	<input type="text" value="31162.06"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10933.91"/>	<input type="text" value="10933.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20228.15"/>	<input type="text" value="20228.15"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

Liberty for All Action Fund

Report Covering the Period: From: 01 / 01 / 2017 To: 06 / 30 / 2017

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	513.21	513.21
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)).....▶	513.21	513.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	513.21	513.21

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	10933.91	10933.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	10933.91	10933.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	0.00	0.00
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)) ..	10933.91	10933.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10933.91	10933.91

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10933.91	10933.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	10933.91	10933.91

**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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" 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)
Liberty for All Action Fund

A. CONSERVATIVE CONNECTOR LLC

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

Mailing Address 425 E MAIN ST
STE 250

City GREENWOOD State IN Zip Code 46143

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 ▼
513.07

Date of Receipt
MM / DD / YYYY
03 / 16 / 2017

Transaction ID : SA17.869

Amount of Each Receipt this Period
109.32

Memo Item
LIST RENTAL INCOME

B. CONSERVATIVE CONNECTOR LLC

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

Mailing Address 425 E MAIN ST
STE 250

City GREENWOOD State IN Zip Code 46143

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 ▼
513.07

Date of Receipt
MM / DD / YYYY
04 / 03 / 2017

Transaction ID : SA17.870

Amount of Each Receipt this Period
371.25

Memo Item
LIST RENTAL INCOME

C. CONSERVATIVE CONNECTOR LLC

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

Mailing Address 425 E MAIN ST
STE 250

City GREENWOOD State IN Zip Code 46143

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 ▼
513.07

Date of Receipt
MM / DD / YYYY
05 / 01 / 2017

Transaction ID : SA17.871

Amount of Each Receipt this Period
32.50

Memo Item
LIST RENTAL INCOME

SUBTOTAL of Receipts This Page (optional).....	513.07
TOTAL This Period (last page this line number only).....	513.07

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial) A. RAMSEY, JOHN, , ,		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017	
Mailing Address P.O. BOX 26141		FEC Identification Number C [] Transaction ID : SB21B.I913 Amount of Each Disbursement this Period [] 300.00	
City ALEXANDRIA	State VA	Zip Code 22313	Category/ Type []
Purpose of Disbursement TRAVEL		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) ▼		Memo Item <input type="checkbox"/> INDIVIDUAL ITEMS BELOW THRESHOLD
State: District:			

Full Name (Last, First, Middle Initial) B. RAMSEY, JOHN, , ,		Date of Disbursement MM / DD / YYYY 06 / 15 / 2017	
Mailing Address P.O. BOX 26141		FEC Identification Number C [] Transaction ID : SB21B.I920 Amount of Each Disbursement this Period [] 200.00	
City ALEXANDRIA	State VA	Zip Code 22313	Category/ Type []
Purpose of Disbursement TRAVEL		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) ▼		Memo Item <input type="checkbox"/> INDIVIDUAL ITEMS BELOW ITEMIZATION THRESHOLD
State: District:			

Full Name (Last, First, Middle Initial) C. RAMSEY, JOHN, , ,		Date of Disbursement MM / DD / YYYY 06 / 19 / 2017	
Mailing Address P.O. BOX 26141		FEC Identification Number C [] Transaction ID : SB21B.I923 Amount of Each Disbursement this Period [] 200.00	
City ALEXANDRIA	State VA	Zip Code 22313	Category/ Type []
Purpose of Disbursement TRAVEL		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) ▼		Memo Item <input type="checkbox"/> INDIVIDUAL ITEMS BELOW ITEMIZATION THRESHOLD
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 700.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)
A. AT&T

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 21 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I891**

Amount of Each Disbursement this Period: 116.39

Memo Item

Full Name (Last, First, Middle Initial)
B. AT&T

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 13 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I896**

Amount of Each Disbursement this Period: 242.61

Memo Item

Full Name (Last, First, Middle Initial)
C. AT&T

Mailing Address 208 S AKARD ST

City DALLAS State TX Zip Code 75202

Purpose of Disbursement PHONE EXPENSE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 10 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I901**

Amount of Each Disbursement this Period: 263.76

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 622.76

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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 S AKARD ST

City
DALLAS

State
TX

Zip Code
75202

Purpose of Disbursement
PHONE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I908
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. AT&T

Mailing Address 208 S AKARD ST

City
DALLAS

State
TX

Zip Code
75202

Purpose of Disbursement
PHONE EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I918
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I885
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		22		2017

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICES

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I892

Amount of Each Disbursement this Period

[REDACTED] 500.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2017

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I898

Amount of Each Disbursement this Period

[REDACTED] 500.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. CMDI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		19		2017

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICE

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I905

Amount of Each Disbursement this Period

[REDACTED] 500.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

[REDACTED] 1500.00

TOTAL 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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I911

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement
DATABASE SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I924

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I882

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

A. GOOGLE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
02 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I888

Amount of Each Disbursement this Period: 60.00

Memo Item

B. GOOGLE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I894

Amount of Each Disbursement this Period: 60.00

Memo Item

C. GOOGLE

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
04 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I900

Amount of Each Disbursement this Period: 60.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 180.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I907

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. GOOGLE

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I916

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. GRINGOLET LLC

Mailing Address 816 BIG WOODS RD

City LONGVIEW State TX Zip Code 75605

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.I880

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial)

A. GRINGOLET LLC

Mailing Address 816 BIG WOODS RD

City
LONGVIEW

State
TX

Zip Code
75605

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I887

Amount of Each Disbursement this Period

[REDACTED] 75.00

Memo Item

Full Name (Last, First, Middle Initial)

B. GRINGOLET LLC

Mailing Address 816 BIG WOODS RD

City
LONGVIEW

State
TX

Zip Code
75605

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I893

Amount of Each Disbursement this Period

[REDACTED] 75.00

Memo Item

Full Name (Last, First, Middle Initial)

C. GRINGOLET LLC

Mailing Address 816 BIG WOODS RD

City
LONGVIEW

State
TX

Zip Code
75605

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I899

Amount of Each Disbursement this Period

[REDACTED] 75.00

Memo Item

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

[REDACTED] 225.00

TOTAL 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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial) A. GRINGOLET LLC		Date of Disbursement MM / DD / YYYY 05 / 01 / 2017	
Mailing Address 816 BIG WOODS RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I906 Amount of Each Disbursement this Period 75.00	
City LONGVIEW	State TX	Zip Code 75605	Category/ Type
Purpose of Disbursement WEB SERVICE		Candidate Name	
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:			

Full Name (Last, First, Middle Initial) B. GRINGOLET LLC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2017	
Mailing Address 816 BIG WOODS RD		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I915 Amount of Each Disbursement this Period 75.00	
City LONGVIEW	State TX	Zip Code 75605	Category/ Type
Purpose of Disbursement WEB SERVICE		Candidate Name	
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:			

Full Name (Last, First, Middle Initial) C. IRS		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017	
Mailing Address 1111 CONSTITUTION AVE NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I903 Amount of Each Disbursement this Period 4965.00	
City WASHINGTON	State DC	Zip Code 20224	Category/ Type
Purpose of Disbursement TAXES		Candidate Name	
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	5115.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input 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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement MM / DD / YYYY 01 / 11 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I883 Amount of Each Disbursement this Period [] 61.76
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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. WELLS FARGO		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I889 Amount of Each Disbursement this Period [] 46.09
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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) C. WELLS FARGO		Date of Disbursement MM / DD / YYYY 03 / 13 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I895 Amount of Each Disbursement this Period [] 46.30
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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)..... ▶

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

[] 154.15
[]

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C Transaction ID : SB21B.I902 Amount of Each Disbursement this Period 44.30
City SAN FRANCISCO	State CA	
Zip Code 94104	Purpose of Disbursement BANK FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. WELLS FARGO		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C Transaction ID : SB21B.I909 Amount of Each Disbursement this Period 72.24
City SAN FRANCISCO	State CA	
Zip Code 94104	Purpose of Disbursement BANK FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. WELLS FARGO		Date of Disbursement MM / DD / YYYY 05 / 22 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C Transaction ID : SB21B.I912 Amount of Each Disbursement this Period 14.50
City SAN FRANCISCO	State CA	
Zip Code 94104	Purpose of Disbursement BANK FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
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:		

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

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

131.04

**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

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NAME OF COMMITTEE (In Full)
Liberty for All Action Fund

Full Name (Last, First, Middle Initial) A. WELLS FARGO		Date of Disbursement MM / DD / YYYY 06 / 12 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I917 Amount of Each Disbursement this Period [] 42.30
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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. WELLS FARGO		Date of Disbursement MM / DD / YYYY 06 / 15 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I919 Amount of Each Disbursement this Period [] 6.50
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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) C. WELLS FARGO		Date of Disbursement MM / DD / YYYY 06 / 19 / 2017
Mailing Address 420 MONTGOMERY ST		FEC Identification Number C [] Transaction ID : SB21B.I922 Amount of Each Disbursement this Period [] 6.50
City SAN FRANCISCO	State CA	Zip Code 94104
Purpose of Disbursement BANK FEE		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).....▶	[] 55.30
TOTAL This Period (last page this line number only).....▶	[] 10674.44