

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**

CAL Freedom PAC (Multi-Candidate Cmte)

ADDRESS (number and street) **2 Civic Center Drive**
#4338
 Check if different than previously reported. (ACC) **San Rafael** **CA** **94913-5703**

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

C **C00629147** 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 **MM / DD / YYYY** in the State of **CA**

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

Election on **MM / DD / YYYY** in the State of **CA**

5. Covering Period **MM / DD / YYYY** **10 / 15 / 2020** through **MM / DD / YYYY** **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.
 Montgomery, Thomas, E, , III

Type or Print Name of Treasurer _____

Signature of Treasurer *Montgomery, Thomas, E, , III* [Electronically Filed] Date **MM / DD / YYYY** **01 / 25 / 2021**

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

CAL Freedom PAC (Multi-Candidate Cmte)

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"/>		44922.44
(b) Cash on Hand at Beginning of Reporting Period.....	53132.72	
(c) Total Receipts (from Line 19)	28503.00	163998.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	81635.72	208920.96
7. Total Disbursements (from Line 31).....	81078.13	208363.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	557.59	557.59
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2145.51	

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

CAL Freedom PAC (Multi-Candidate Cmte)

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).....	100.00	5460.30
(ii) Unitemized	0.00	35.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	100.00	5495.52
(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)	100.00	5495.52
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.).....	28403.00	158503.00
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)).....▶	28503.00	163998.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	28503.00	163998.52

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	12.00	8687.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	12.00	8687.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1500.00
24. Independent Expenditures (use Schedule E)	71598.13	153838.63
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).....	9468.00	44337.20
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)) ..	81078.13	208363.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	81078.13	208363.37

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)	100.00	5495.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	100.00	5495.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	12.00	8687.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12.00	8687.54

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

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

FOR LINE NUMBER: PAGE 6 OF 15
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Montgomery, Thomas, E, , III

Mailing Address 4340 Redwood Highway
 F119

City San Rafael State CA Zip Code 94903

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

Name of Employer (for Individual) Political Communications, Inc Occupation (for Individual) Professional Treasurer

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1160.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2020

Transaction ID : A-935

Amount of Each Receipt this Period
 100.00

Memo Item

B. 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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	100.00

**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 7 OF 15
<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)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Dubois, Brandee, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1490 Arena Drive
 City Bullhead City State AZ Zip Code 86442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bullhead City USD Occupation (for Individual) Teacher
 Receipt For: 2020
 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 / 30 / 2020
Transaction ID : A-917
 Amount of Each Receipt this Period 2000.00
 Memo Item
 Non-Contribution account-Earmarked to Support Donald Trump
 Non-Contribution account-Earmarked to Support Donald Trump

B. Entner, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2169 East Via Del Aqua Cove
 City Fort Mohave State AZ Zip Code 86426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Results Real Estate, LLC Occupation (for Individual) Realtor
 Receipt For: 2020
 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 / 06 / 2020
Transaction ID : A-926
 Amount of Each Receipt this Period 500.00
 Memo Item
 Non-Contribution account-Earmarked to Support Donald Trump
 Non-Contribution account-Earmarked to Support Donald Trump

C. Jones, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6410 South Via De Oro
 City Fort Mohave State AZ Zip Code 86426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Desert Lakes Realty Occupation (for Individual) Realtor
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 6903.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2020
Transaction ID : A-927
 Amount of Each Receipt this Period 6903.00
 Memo Item
 Non-Contribution account-Earmarked to Support Donald Trump
 Non-Contribution account-Earmarked to Support Donald Trump

SUBTOTAL of Receipts This Page (optional).....	9403.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 15
<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)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Strong America PAC

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

Mailing Address 28005 Smyth Drive, Suite 123

City Valencia	State CA	Zip Code 91355
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00609396

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	27	/	2020

Transaction ID : A-907

Amount of Each Receipt this Period
19000.00

Memo Item
 Contribution to non-contribution account-Earmarked to oppose Harley Rouda
 Contribution to non-contribution account-Earmarked to oppose Harley Rouda

B.

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

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

SUBTOTAL of Receipts This Page (optional).....	19000.00
TOTAL This Period (last page this line number only).....	28403.00

**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)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Chase Bank

Full Name (Last, First, Middle Initial)

Mailing Address 437 Corte Madera Town Center

City Corte Madera State CA Zip Code 94925

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 30 / 2020

FEC Identification Number: C

Transaction ID : B-924

Amount of Each Disbursement this Period: 12.00

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).....▶	12.00
TOTAL This Period (last page this line number only).....▶	12.00

**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)
CAL Freedom PAC (Multi-Candidate Cmte)

Full Name (Last, First, Middle Initial) A. Lamar Corp		Date of Disbursement MM / DD / YYYY 11 / 09 / 2020
Mailing Address 845 Airpark Drive		FEC Identification Number C [] Transaction ID : B-929
City Bullhead City	State AZ	Zip Code 86429
Purpose of Disbursement Non-contribution account payment for previous IE		Amount of Each Disbursement this Period [] 6105.00
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00	Category/Type 004	

Full Name (Last, First, Middle Initial) B. Lamar Corp		Date of Disbursement MM / DD / YYYY 11 / 09 / 2020
Mailing Address 845 Airpark Drive		FEC Identification Number C [] Transaction ID : B-930
City Bullhead City	State AZ	Zip Code 86429
Purpose of Disbursement Non-contribution account payment for previous IE		Amount of Each Disbursement this Period [] 3297.95
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 00	Category/Type 004	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C []
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period []
Candidate Name		Non-Contribution Account <input type="checkbox"/> Memo Item
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:	Category/Type []	

SUBTOTAL of Disbursements This Page (optional).....▶	9403.00
TOTAL This Period (last page this line number only).....▶	9403.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 15
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lamar Corp			Nature of Debt (Purpose): Non-contribution account-IE to support Donald Trump
Mailing Address 845 Airpark Drive			
City Bullhead City	State AZ	Zip Code 86429	

Outstanding Balance Beginning This Period 3297.95	Transaction ID : D-818	
Amount Incurred This Period 0.00	Payment This Period 3297.95	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Communications, Inc			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	Transaction ID : D-667	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Communications, Inc			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period 500.00	Transaction ID : D-673	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

1) SUBTOTALS This Period This Page (optional)..... ▶	1000.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 15
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
CAL Freedom PAC (Multi-Candidate Cmte)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Political Communications, Inc			Nature of Debt (Purpose): Compliance and Accounting
Mailing Address 4340 Redwood Highway F119			
City San Rafael	State CA	Zip Code 94903	

Outstanding Balance Beginning This Period <input type="text" value="500.00"/>	Transaction ID : D-681	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Venture Strategic Inc			Nature of Debt (Purpose): Walk list data
Mailing Address 1 Corporate Park #101			
City Irvine	State CA	Zip Code 92606	

Outstanding Balance Beginning This Period <input type="text" value="645.51"/>	Transaction ID : D-654	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="645.51"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1145.51"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="2145.51"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2145.51"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
CAL Freedom PAC (Multi-Candidate Cmte)
FEC IDENTIFICATION NUMBER
C C00629147

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: DMH Meyer, Inc.
Mailing Address: 1560-1 Newbury Road
City: Thousand Oaks, State: CA, Zip Code: 91320
Purpose of Expenditure: Mailer
Category/Type: 004
Name of Federal Candidate: Rouda, Harley, E., Jr.
Office Sought: House, District: 48, State: CA
Amount: 26199.17
Transaction ID: E-891
Date of Disbursement or Obligation: 10/15/2020
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 53076.34

Full Name of Payee: DMH Meyer, Inc.
Mailing Address: 1560-1 Newbury Road
City: Thousand Oaks, State: CA, Zip Code: 91320
Purpose of Expenditure: Mailer
Category/Type: 004
Name of Federal Candidate: Rouda, Harley, E., Jr.
Office Sought: House, District: 48, State: CA
Amount: 22082.66
Transaction ID: E-901
Date of Disbursement or Obligation: 10/22/2020
Disbursement For: General 2020
Calendar Year-To-Date Per Election for Office Sought: 75159.00

(a) SUBTOTAL of Itemized Independent Expenditures 48281.83
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Montgomery, Thomas, E., III

[Electronically Filed]

Date 01 / 25 / 2021

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) CAL Freedom PAC (Multi-Candidate Cmte)	FEC IDENTIFICATION NUMBER ▼ C C00629147
------------------------------------------------------------------------------	----------------------------------------------------------

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item DMH Meyer, Inc. Non-Contribution Account	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1560-1 Newbury Road	Amount <input type="text"/>
City Thousand Oaks State CA Zip Code 91320	Transaction ID : E-915 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Mailer Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rouda, Harley, E, , Jr Office Sought: <input checked="" type="checkbox"/> House District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 90975.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item DMH Meyer, Inc. Non-Contribution Account	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1560-1 Newbury Road	Amount <input type="text"/>
City Thousand Oaks State CA Zip Code 91320	Transaction ID : E-931 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Graphic design work Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rouda, Harley, E, , Jr Office Sought: <input checked="" type="checkbox"/> House District: 48 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 98475.30	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 23316.30
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Montgomery, Thomas, E, , III

[Electronically Filed]

Date / /

Signature

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

NAME OF COMMITTEE (In Full) CAL Freedom PAC (Multi-Candidate Cmte)	FEC IDENTIFICATION NUMBER ▼ C C00629147
------------------------------------------------------------------------------	----------------------------------------------------------

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Lamar Corp <input checked="" type="checkbox"/> Memo Item Additional Contribution Made information related to Debt Payment in the period	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 845 Airpark Drive	Amount <input type="text"/>
City Bullhead City State AZ Zip Code 86429	Transaction ID : E-887 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Billboards-Paid from non-contribution account Category/Type 004	Name of Federal Candidate: Trump, Donald, J, , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 48903.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address	Amount <input type="text"/>
City State Zip Code	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Category/Type	Name of Federal Candidate: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/> 71598.13

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Montgomery, Thomas, E, , III [Electronically Filed] Date / /