

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**
True North PAC

ADDRESS (number and street) **901 N Washington St, Suite 700**
 Check if different than previously reported. (ACC) **Alexandria VA 22314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00571000 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 / / in the State of

5. Covering Period / / 2019 through / / 2019

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

Signature of Treasurer Koch, Timothy A., , , [Electronically Filed] Date / / 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)

Page 2

Write or Type Committee Name

True North PAC

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="2019"/>	<input type="text" value="16512.68"/>	<input type="text" value="16512.68"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="27747.87"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="144196.51"/>	<input type="text" value="307026.51"/>
(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="171944.38"/>	<input type="text" value="323539.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="148364.54"/>	<input type="text" value="299959.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23579.84"/>	<input type="text" value="23579.84"/>
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="4683.49"/>	

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

True North PAC

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).....	43696.51	102146.51
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	43696.51	102146.51
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	85500.00	169000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	129196.51	271146.51
12. Transfers From Affiliated/Other Party Committees.....	10000.00	30880.00
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.....	5000.00	5000.00
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)).....▶	144196.51	307026.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	144196.51	307026.51

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	113364.54	209959.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	113364.54	209959.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	90000.00
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)) ..	148364.54	299959.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	148364.54	299959.35

DETAILED SUMMARY PAGE
of Disbursements

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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)	129196.51	271146.51
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	129196.51	271146.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	113364.54	209959.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	113364.54	209959.35

**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 55
<input checked="" 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 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)
True North PAC

A. Atuk, Debbie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 409 Bergen Street
 City Brooklyn State NY Zip Code 11217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bering Straits Native Corp. Occupation (for Individual) Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 16 / 2019
Transaction ID : SA11AI.6497
 Amount of Each Receipt this Period 500.00
 Memo Item Contribution

B. Bertson, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 F St NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dentons Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2019
Transaction ID : SA11AI.6515
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Bertson, Todd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 F St NE
 City Washington State DC Zip Code 20002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Dentons Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 28 / 2019
Transaction ID : SA11AI.6666
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 7 OF 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
True North PAC

A. Burnett, Wallace, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6218 Berkeley Rd
 City Alexandria State VA Zip Code 22307
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Crossroads Strategies, LLC Occupation (for Individual) Attorney/Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6577
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

B. Epstein, Beau, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 2010
 City Nome State AK Zip Code 99762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XLYPZK LLC Occupation (for Individual) Mining
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2683.33

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6565
 Amount of Each Receipt this Period 2683.33
 Memo Item Contribution

C. Epstein, Veronica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9811 W Charleston Blvd Ste 2-444
 City Las Vegas State NV Zip Code 89117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2683.33

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6567
 Amount of Each Receipt this Period 2683.33
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... **7366.66**
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 55
	<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
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NAME OF COMMITTEE (In Full)
True North PAC

A. Lester, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2629 Pasatiempo Gln
 City Escondido State CA Zip Code 92025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RE-Broker Group Occupation (for Individual) Real Estate Dir. of Operations
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2683.33

Date of Receipt **08 / 21 / 2019**
Transaction ID : SA11AI.6558
 Amount of Each Receipt this Period 2683.33
 Memo Item Contribution

B. Nyholm, Allison, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2831 44th St NW
 City Washington State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Steptoe Occupation (for Individual) Federal Advocacy
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1500.00

Date of Receipt **11 / 12 / 2019**
Transaction ID : SA11AI.6691
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

C. Rogers, Natalie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1263 First Street SE #1118
 City Washington State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Subject Matter Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt **07 / 18 / 2019**
Transaction ID : SA11AI.6501
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	6183.33
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 9 OF 55
	<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
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NAME OF COMMITTEE (In Full)
True North PAC

A. Saomarcos, David, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9320 Carmel Mtn Rd
 Ste 1
 City San Diego State CA Zip Code 92129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Rivers of Gold Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2683.33

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6571
 Amount of Each Receipt this Period 2683.33
 Memo Item Contribution

B. Schlotfeldt, Walt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2510 N Post Rd
 City Anchorage State AK Zip Code 99501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Denali Group Inc. Occupation (for Individual) Business Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2779.86

Date of Receipt **11 / 10 / 2019**
Transaction ID : SA11AI.6724
 Amount of Each Receipt this Period 2779.86
 Memo Item In-Kind: Food & Beverage

C. Smith, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11200 Jerome St
 City Anchorage State AK Zip Code 99516
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vitus Energy LLC Occupation (for Individual) Chief Strategic Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6574
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	6463.19
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 10 OF 55
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. Stephens, Donald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 465 California Street
 Suite 330
 City San Francisco State CA Zip Code 94104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DR Stephens Occupation (for Individual) Real Estate Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 08 / 2019**
Transaction ID : SA11AI.6703
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

B. Tangen, Jon Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2170 Innes Circle
 City Anchorage State AK Zip Code 99515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JP Tangen Attorney at Law Occupation (for Individual) Legal Counsel
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2683.33

Date of Receipt **08 / 29 / 2019**
Transaction ID : SA11AI.6569
 Amount of Each Receipt this Period 2683.33
 Memo Item Contribution

C. Turner, Pamela, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4831 26th St N
 City Arlington State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prime Policy Group Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 24 / 2019**
Transaction ID : SA11AI.6727
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 7933.33
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 11 OF 55
<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Wendt, Gregory, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 1 Market Street Ste 2000		Transaction ID : SA11AI.6744
City San Francisco	State CA	Zip Code 94105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Cap. Research Global Investors	Occupation (for Individual) Partner	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Wilcox, Kristina, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2019
Mailing Address 3008 2nd Road North		Transaction ID : SA11AI.6611
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer (for Individual) Capitol Hill Consulting	Occupation (for Individual) Consultant	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Williams, Christine, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 29 / 2019
Mailing Address 1221 W 11th Ave		Transaction ID : SA11AI.6576
City Anchorage	State AK	Zip Code 99501
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer (for Individual) Outlook Law	Occupation (for Individual) Attorney	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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: PAGE 12 OF 55
(check only one)

<input checked="" 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 type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
True North PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Williams, Christine, , ,

Mailing Address 1221 W 11th Ave

City Anchorage	State AK	Zip Code 99501
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Outlook Law	Occupation (for Individual) Attorney
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	28	/	2019

Transaction ID : SA11AI.6667

Amount of Each Receipt this Period
250.00

Memo Item Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Wyler, Anneliese, , ,

Mailing Address 135 S River Road

City Sewalls Point	State FL	Zip Code 34996
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	02	/	2019

Transaction ID : SA11AI.6457

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

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

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	43696.51

**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 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. AFOGNAK NATIVE CORPORATION-ALUTIIQ PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3909 ARCTIC BLVD SUITE 400
 City ANCHORAGE State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C** C00443937
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **09 / 20 / 2019**
Transaction ID : SA11C.6608
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

B. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00004275
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **11 / 21 / 2019**
Transaction ID : SA11C.6695
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

C. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600
 City WASHINGTON State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C** C00004275
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 30 / 2019**
Transaction ID : SA11C.6739
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 14 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. ASSOCIATION OF AMERICAN RAILROADS POLITICAL ACTION COMMITTEE (RAILPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 3RD STREET, S..W.
 SUITE 1000
 City WASHINGTON State DC Zip Code 20024
 FEC ID number of contributing federal political committee. **C** C00280743
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **12 / 18 / 2019**
Transaction ID : SA11C.6722
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 208 S. AKARD STREET
 SUITE 2701
 City DALLAS State TX Zip Code 75202
 FEC ID number of contributing federal political committee. **C** C00109017
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 15 / 2019**
Transaction ID : SA11C.6690
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2000 WESTCHESTER AVENUE
 City PURCHASE State NY Zip Code 10577
 FEC ID number of contributing federal political committee. **C** C00478099
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 22 / 2019**
Transaction ID : SA11C.6697
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 15 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. BNSF RAILWAY COMPANY RAILPAC (BNSF RAILPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 961039
 City FORT WORTH State TX Zip Code 76161
 FEC ID number of contributing federal political committee. **C** C00235739
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 25 / 2019**
Transaction ID : SA11C.6699
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

B. BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 WESTLAKE PARK BLVD
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C** C00060103
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **12 / 11 / 2019**
Transaction ID : SA11C.6706
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

C. CHENEGA CORPORATION PAC (CHENEGA PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3000 C ST STE 301
 City ANCHORAGE State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C** C00549865
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **11 / 08 / 2019**
Transaction ID : SA11C.6687
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
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 16 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COMCAST CORPORATION & NBCUNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00248716

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	/	21	/	2019

Transaction ID : SA11C.6694

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
FEDERAL EXPRESS POLITICAL ACTION COMMITTEE (FEDEXPAC)

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068692

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
07	/	19	/	2019

Transaction ID : SA11C.6512

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPPAC)

Mailing Address 300 M STREET S.E.
SUITE 350

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00325092

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
09	/	30	/	2019

Transaction ID : SA11C.6621

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 17 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. INDEPENDENCE BLUE CROSS PAC (IBC PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1901 MARKET STREET

City PHILADELPHIA	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450056

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		02		2019

Transaction ID : SA11C.6624

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. INTERNATIONAL UNION OF PAINTERS & ALLIED TRADES LEGISLATIVE EDUCATIONAL COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7234 PARKWAY DRIVE

City HANOVER	State MD	Zip Code 21076
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C90013582

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
12		30		2019

Transaction ID : SA11C.6742

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3050 K STREET NW SUITE 400

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00301929

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
07		19		2019

Transaction ID : SA11C.6513

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 18 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3050 K STREET NW SUITE 400
 City WASHINGTON State DC Zip Code 20007
 FEC ID number of contributing federal political committee. **C** C00301929
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **07 / 30 / 2019**
Transaction ID : SA11C.6519
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 905 16TH ST., N.W.
 City WASHINGTON State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C** C00007922
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **07 / 19 / 2019**
Transaction ID : SA11C.6517
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 CRYSTAL DRIVE SUITE 100
 City ARLINGTON State VA Zip Code 22202
 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 ▼ 5000.00

Date of Receipt **09 / 09 / 2019**
Transaction ID : SA11C.6600
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 19 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. NANA REGIONAL CORPORATION PAC (NANAPAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 909 W. 9TH AVE

City ANCHORAGE	State AK	Zip Code 99501
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00512327

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
10	/	28	/	2019

Transaction ID : SA11C.6671

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO	State IL	Zip Code 60611
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00030718

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
11	/	07	/	2019

Transaction ID : SA11C.6685

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. NCTA - THE INTERNET AND TELEVISION ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010082

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2019

Transaction ID : SA11C.6573

Amount of Each Receipt this Period
3500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
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 20 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NCTA - THE INTERNET AND TELEVISION ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010082

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
09		30		2019

Transaction ID : SA11C.6619

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address ONE CONSTITUTION AVE NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009282

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		18		2019

Transaction ID : SA11C.6693

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)

Mailing Address 1015 15TH STREET NW
SUITE 200

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

FEC ID number of contributing federal political committee. **C** C00323048

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
10		28		2019

Transaction ID : SA11C.6669

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 21 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)

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

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

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

FEC ID number of contributing federal political committee. **C** C00361758

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
12	/	24	/	2019

Transaction ID : SA11C.6729

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

B. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

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

FEC ID number of contributing federal political committee. **C** C00284885

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	/	02	/	2019

Transaction ID : SA11C.6623

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

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

Mailing Address 1155 F STREET, NW
SUITE 400

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

FEC ID number of contributing federal political committee. **C** C00284885

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
12	/	30	/	2019

Transaction ID : SA11C.6740

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 22 OF 55
<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

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NAME OF COMMITTEE (In Full)
True North PAC

A. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

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

Mailing Address 700 13TH STREET NW, SUITE 350

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

FEC ID number of contributing federal political committee. **C** C00010470

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
12	/	18	/	2019

Transaction ID : SA11C.6723

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. UNITED PARCEL SERVICE INC. PAC

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

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

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
09	/	30	/	2019

Transaction ID : SA11C.6620

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
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Amount of Each Receipt this Period

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	85500.00

**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 23 OF 55
<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)
True North PAC

A. Sullivan Victory 2020
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 901 N Washington St, Suite 700

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00609255

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 12 / 2019
Transaction ID : SA12.6709

Amount of Each Receipt this Period
10000.00

Memo Item
JFC Disbtribution

B. Jornayvaz, Robert, P., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1001 17th St Ste 1

City Denver	State CO	Zip Code 80202
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Intrepid Potash, Inc. CEO

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 / 12 / 2019
Transaction ID : SA12.6709.0

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

C. Jornayvaz, Louisa, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1001 17th St Ste 1

City Denver	State CO	Zip Code 80202
----------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Self Employed Artist

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 / 12 / 2019
Transaction ID : SA12.6709.1

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

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

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

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

FOR LINE NUMBER: PAGE 24 OF 55
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. STRANGE FOR SENATE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 3670
 City MONTGOMERY State AL Zip Code 36109
 FEC ID number of contributing federal political committee. **C** C00629451
 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 Y Y
 10 / 28 / 2019
Transaction ID : SA16.6664
 Amount of Each Receipt this Period
 5000.00
 Memo Item
 Contribution Refund

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).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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

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NAME OF COMMITTEE (In Full)
True North PAC

A. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Credit Card Payment: See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 02 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6459

Amount of Each Disbursement this Period
71.99

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Vendor Rebate

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 06 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6459.C

Amount of Each Disbursement this Period
- 12.39

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Vendor Rebate

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 15 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6459.

Amount of Each Disbursement this Period
- 135.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 71.99

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)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6459.: Amount of Each Disbursement this Period [] 12.48	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6459.4 Amount of Each Disbursement this Period [] 12.89	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 04 / 13 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6459. Amount of Each Disbursement this Period [] 12.77	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 0.00	
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)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.4

Amount of Each Disbursement this Period: 8.70

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.7

Amount of Each Disbursement this Period: 11.20

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.

Amount of Each Disbursement this Period: 8.89

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.1

Amount of Each Disbursement this Period: 10.21

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.1

Amount of Each Disbursement this Period: 10.60

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6459.1

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 15 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6459.**

Amount of Each Disbursement this Period: 24.13

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement Credit Card Payment: See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 16 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6490**

Amount of Each Disbursement this Period: 3022.83

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement Vendor Rebate

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6490.**

Amount of Each Disbursement this Period: - 1.17

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3022.83
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)
True North PAC

A. Aurora Charters

Full Name (Last, First, Middle Initial)

Mailing Address 1302-C Fourth Ave

City Seward State AK Zip Code 99664

Purpose of Disbursement
PAC Event Expense: Fishing Charter

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6490.
Amount of Each Disbursement this Period: 3024.00

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Credit Card Payment: See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6524
Amount of Each Disbursement this Period: 9328.34

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Vendor Rebate

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6524.
Amount of Each Disbursement this Period: - 1.03

Memo Item

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

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

9328.34

- 1.03

**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 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)
True North PAC

Full Name (Last, First, Middle Initial) A. BAC Transportation		Date of Disbursement MM / DD / YYYY 08 / 10 / 2019	
Mailing Address 151 W 100th Ave		FEC Identification Number C [] Transaction ID : SB21B.6524. Amount of Each Disbursement this Period [] 326.89	
City Anchorage	State AK	Zip Code 99517	Category/Type []
Purpose of Disbursement PAC Event Expense: Transportation			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. BAC Transportation		Date of Disbursement MM / DD / YYYY 07 / 16 / 2019	
Mailing Address 151 W 100th Ave		FEC Identification Number C [] Transaction ID : SB21B.6524. Amount of Each Disbursement this Period [] 1961.34	
City Anchorage	State AK	Zip Code 99517	Category/Type []
Purpose of Disbursement PAC Event Expense: Transportation			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. BAC Transportation		Date of Disbursement MM / DD / YYYY 07 / 16 / 2019	
Mailing Address 151 W 100th Ave		FEC Identification Number C [] Transaction ID : SB21B.6524. Amount of Each Disbursement this Period [] 1961.34	
City Anchorage	State AK	Zip Code 99517	Category/Type []
Purpose of Disbursement PAC Event Expense: Transportation			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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).....▶	[] 0.00
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)
True North PAC

A. BAC Transportation

Full Name (Last, First, Middle Initial)

Mailing Address 151 W 100th Ave

City Anchorage State AK Zip Code 99517

Purpose of Disbursement
PAC Event Expense: Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6524.4
Amount of Each Disbursement this Period: 2420.40

Memo Item

B. BLT Prime

Full Name (Last, First, Middle Initial)

Mailing Address 1100 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
PAC Event Expense: Food & Beverage

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 16 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6524.9
Amount of Each Disbursement this Period: 2368.60

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Credit Card Payment: Postage Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 20 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6560
Amount of Each Disbursement this Period: 55.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 55.00

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)
True North PAC

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement MM / DD / YYYY 09 / 18 / 2019	
Mailing Address PO Box 650448			FEC Identification Number C [REDACTED]	
City Dallas	State TX	Zip Code 75265	Transaction ID : SB21B.6601	
Purpose of Disbursement Credit Card Payment: See Memos			Amount of Each Disbursement this Period [REDACTED] 1632.31	
Candidate Name			Memo Item <input type="checkbox"/>	
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. American Express			Date of Disbursement MM / DD / YYYY 08 / 15 / 2019	
Mailing Address PO Box 650448			FEC Identification Number C [REDACTED]	
City Dallas	State TX	Zip Code 75265	Transaction ID : SB21B.6601.C	
Purpose of Disbursement Vendor Rebate			Amount of Each Disbursement this Period [REDACTED] - 30.24	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
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. BAC Transportation			Date of Disbursement MM / DD / YYYY 08 / 16 / 2019	
Mailing Address 151 W 100th Ave			FEC Identification Number C [REDACTED]	
City Anchorage	State AK	Zip Code 99517	Transaction ID : SB21B.6601.	
Purpose of Disbursement PAC Event Expense: Transportation			Amount of Each Disbursement this Period [REDACTED] 1634.45	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
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)..... ▶

[REDACTED] 1632.31
[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)
True North PAC

Full Name (Last, First, Middle Initial)

A. Alaska Airlines

Mailing Address PO Box 68900

City
Seattle

State
WA

Zip Code
98168

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.6601.
Amount of Each Disbursement this Period

[] 28.10 []

Memo Item

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 650448

City
Dallas

State
TX

Zip Code
75265

Purpose of Disbursement
Credit Card Payment: See Memos

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.6629
Amount of Each Disbursement this Period

[] 5202.69 []

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 650448

City
Dallas

State
TX

Zip Code
75265

Purpose of Disbursement
Vendor Rebate

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	9

FEC Identification Number

C []

Transaction ID : SB21B.6629.
Amount of Each Disbursement this Period

[] - 93.84 []

Memo Item

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

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

[] 5202.69 []

[] [] [] [] [] [] [] [] [] []

**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)
True North PAC

A. BAC Transportation

Full Name (Last, First, Middle Initial)

Mailing Address 151 W 100th Ave

City Anchorage State AK Zip Code 99517

Purpose of Disbursement Vendor Refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 11 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.3

Amount of Each Disbursement this Period: - 400.00

Memo Item

B. HotelTonight.com

Full Name (Last, First, Middle Initial)

Mailing Address 176 Grand St

City New York State NY Zip Code 10013

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.3

Amount of Each Disbursement this Period: 456.00

Memo Item

C. Alaska Airlines

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.3

Amount of Each Disbursement this Period: 228.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
True North PAC

Full Name (Last, First, Middle Initial)
A. Alaska Airlines

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.!

Amount of Each Disbursement this Period: 353.30

Memo Item

Full Name (Last, First, Middle Initial)
B. Alaska Airlines

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 28 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.€

Amount of Each Disbursement this Period: 204.30

Memo Item

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

Mailing Address 1302-C Fourth Ave

City Seward State AK Zip Code 99664

Purpose of Disbursement Event Expense: Fishing Charter

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.

Amount of Each Disbursement this Period: 3024.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
True North PAC

A. Hyatt Regency Newport Beach

Full Name (Last, First, Middle Initial)
Mailing Address 1107 Jamboree Road

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
10 / 03 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6629.1
Amount of Each Disbursement this Period: 368.94

Memo Item

B. Amtrak

Full Name (Last, First, Middle Initial)
Mailing Address 60 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6629.1
Amount of Each Disbursement this Period: 188.00

Memo Item

C. Amtrak

Full Name (Last, First, Middle Initial)
Mailing Address 60 Massachusetts Ave., NE

City Washington State DC Zip Code 20002

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number: C
Transaction ID : SB21B.6629.1
Amount of Each Disbursement this Period: 315.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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)
True North PAC

A. New York Athletic Club

Full Name (Last, First, Middle Initial)

Mailing Address 180 Central Park S

City New York State NY Zip Code 10019

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6629.

Amount of Each Disbursement this Period: 336.28

Memo Item

B. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement Credit Card Payment: See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6730

Amount of Each Disbursement this Period: 419.58

Memo Item

C. American Express

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement Vendor Rebate

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 14 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6730.

Amount of Each Disbursement this Period: - 52.95

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 419.58

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)
True North PAC

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 10 / 14 / 2019
Mailing Address PO Box 650448		FEC Identification Number C [] Transaction ID : SB21B.6730. Amount of Each Disbursement this Period [] - 16.62
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Vendor Rebate		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Simplicity Catering		Date of Disbursement MM / DD / YYYY 11 / 15 / 2019
Mailing Address 6402 Arlington Blvd #B150		FEC Identification Number C [] Transaction ID : SB21B.6730.2 Amount of Each Disbursement this Period [] 339.15
City Falls Church	State VA	Zip Code 22042
Purpose of Disbursement PAC Event Expense: Catering		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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement MM / DD / YYYY 07 / 18 / 2019
Mailing Address PO Box 84314		FEC Identification Number C [] Transaction ID : SB21B.6499 Amount of Each Disbursement this Period [] 19.80
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement PAC Credit Card Processing		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).....▶	[] 19.80
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)
True North PAC

Full Name (Last, First, Middle Initial)

A. Anedot

Mailing Address PO Box 84314

City: Baton Rouge State: LA Zip Code: 70884

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2019

FEC Identification Number

C []

Transaction ID : SB21B.6518

Amount of Each Disbursement this Period

[] 78.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Anedot

Mailing Address PO Box 84314

City: Baton Rouge State: LA Zip Code: 70884

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2019

FEC Identification Number

C []

Transaction ID : SB21B.6622

Amount of Each Disbursement this Period

[] 19.80

Memo Item

Full Name (Last, First, Middle Initial)

C. Anedot

Mailing Address PO Box 84314

City: Baton Rouge State: LA Zip Code: 70884

Purpose of Disbursement
PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2019

FEC Identification Number

C []

Transaction ID : SB21B.6692

Amount of Each Disbursement this Period

[] 58.80

Memo Item

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

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

[] 156.90

[]

**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)
True North PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement
PAC Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 11 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6708**

Amount of Each Disbursement this Period: 195.30

Memo Item

B. Black Rock Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 66 Canal Center Plaza Ste 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 19 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6505**

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Black Rock Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 66 Canal Center Plaza Ste 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 19 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6509**

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5195.30

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)
True North PAC

Full Name (Last, First, Middle Initial) A. Black Rock Group LLC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6581 Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement PAC Strategic Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Black Rock Group LLC		Date of Disbursement MM / DD / YYYY 09 / 09 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6596 Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement PAC Strategic Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Black Rock Group LLC		Date of Disbursement MM / DD / YYYY 10 / 31 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6682 Amount of Each Disbursement this Period 2500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type
Purpose of Disbursement PAC Strategic Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	7500.00
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)
True North PAC

Full Name (Last, First, Middle Initial) A. Black Rock Group LLC		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 18 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	
Purpose of Disbursement PAC Strategic Consulting		FEC Identification Number C [] Transaction ID : SB21B.6719 Amount of Each Disbursement this Period [] 5000.00	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Cooper Landing Fish Camp LLC		Date of Disbursement M M / D D / Y Y Y Y Y 07 / 29 / 2019	
Mailing Address PO Box 557			
City Cooper Landing	State AK	Zip Code 99567	
Purpose of Disbursement PAC Event Expense: Fishing Guide Services		FEC Identification Number C [] Transaction ID : SB21B.6520 Amount of Each Disbursement this Period [] 3090.00	
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:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Hotel Alyeska		Date of Disbursement M M / D D / Y Y Y Y Y 10 / 02 / 2019	
Mailing Address 1000 Arlberg Road			
City Girdwood	State AK	Zip Code 99587	
Purpose of Disbursement PAC Event Expense:Catering / Lodging		FEC Identification Number C [] Transaction ID : SB21B.6625 Amount of Each Disbursement this Period [] 9361.43	
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:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....	[] 17451.43
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)
True North PAC

Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC			Date of Disbursement MM / DD / YYYY 07 / 30 / 2019	
Mailing Address 901 N. Washington St. Suite 700			FEC Identification Number C [] Transaction ID : SB21B.6521 Amount of Each Disbursement this Period [] 1250.00	
City Alexandria	State VA	Zip Code 22314	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
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"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. Koch & Hoos, LLC			Date of Disbursement MM / DD / YYYY 08 / 26 / 2019	
Mailing Address 901 N. Washington St. Suite 700			FEC Identification Number C [] Transaction ID : SB21B.6563 Amount of Each Disbursement this Period [] 1250.00	
City Alexandria	State VA	Zip Code 22314	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
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"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. Koch & Hoos, LLC			Date of Disbursement MM / DD / YYYY 10 / 30 / 2019	
Mailing Address 901 N. Washington St. Suite 700			FEC Identification Number C [] Transaction ID : SB21B.6672 Amount of Each Disbursement this Period [] 1250.00	
City Alexandria	State VA	Zip Code 22314	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
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"/>	
State: District:			Memo Item <input type="checkbox"/>	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3750.00
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)
True North PAC

Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 10 / 30 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6674 Amount of Each Disbursement this Period [REDACTED] 1250.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		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. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 11 / 25 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6698 Amount of Each Disbursement this Period [REDACTED] 1273.94
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		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) C. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 12 / 17 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6715 Amount of Each Disbursement this Period [REDACTED] 1250.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		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	

SUBTOTAL of Disbursements This Page (optional)..... ▶	[REDACTED] 3773.94
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)
True North PAC

Full Name (Last, First, Middle Initial)
A. MKJ, Inc.

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 19 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6507**

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. MKJ, Inc.

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 19 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6511**

Amount of Each Disbursement this Period: 5000.00

Memo Item

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

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6583**

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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)
True North PAC

Full Name (Last, First, Middle Initial) A. MKJ, Inc.		Date of Disbursement MM / DD / YYYY 10 / 31 / 2019	
Mailing Address 5905 Gloster Rd		FEC Identification Number C [] Transaction ID : SB21B.6675 Amount of Each Disbursement this Period 5000.00	
City Bethesda	State MD	Zip Code 20816	Category/ Type []
Purpose of Disbursement PAC Fundraising Consulting		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"/>
State: District:			

Full Name (Last, First, Middle Initial) B. MKJ, Inc.		Date of Disbursement MM / DD / YYYY 10 / 31 / 2019	
Mailing Address 5905 Gloster Rd		FEC Identification Number C [] Transaction ID : SB21B.6677 Amount of Each Disbursement this Period 5000.00	
City Bethesda	State MD	Zip Code 20816	Category/ Type []
Purpose of Disbursement PAC Fundraising Consulting		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"/>
State: District:			

Full Name (Last, First, Middle Initial) C. MKJ, Inc.		Date of Disbursement MM / DD / YYYY 12 / 18 / 2019	
Mailing Address 5905 Gloster Rd		FEC Identification Number C [] Transaction ID : SB21B.6721 Amount of Each Disbursement this Period 10000.00	
City Bethesda	State MD	Zip Code 20816	Category/ Type []
Purpose of Disbursement PAC Fundraising Consulting		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"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	20000.00
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)
True North PAC

A. Rizzo, Laura, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1316 Alexandria Ave

City Alexandria State VA Zip Code 22308

Purpose of Disbursement
Expense Reimbursement: See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6585**

Amount of Each Disbursement this Period: 1418.50

Memo Item

B. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 20980

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 14 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6585.c**

Amount of Each Disbursement this Period: 545.30

Memo Item

C. Alaska Airlines

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 03 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6585.**

Amount of Each Disbursement this Period: 487.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1418.50

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)
True North PAC

A. Budget Rent-A-Car of Anchorage

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 201669

City Anchorage State AK Zip Code 99520

Purpose of Disbursement
PAC Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 06 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6585.1

Amount of Each Disbursement this Period: 300.11

Memo Item

B. Rizzo Dukes Group LLC

Full Name (Last, First, Middle Initial)
Mailing Address 1316 Alexandria Ave

City Alexandria State VA Zip Code 22308

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 27 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6564

Amount of Each Disbursement this Period: 4200.00

Memo Item

C. Rizzo Dukes Group LLC

Full Name (Last, First, Middle Initial)
Mailing Address 1316 Alexandria Ave

City Alexandria State VA Zip Code 22308

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6679

Amount of Each Disbursement this Period: 4812.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9012.20

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)
True North PAC

A. Rizzo Dukes Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1316 Alexandria Ave

City Alexandria State VA Zip Code 22308

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6717

Amount of Each Disbursement this Period: 5391.67

Memo Item

B. Saltwater Safari Company

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1689

City Seward State AK Zip Code 99664

Purpose of Disbursement PAC Event Expense: Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6578

Amount of Each Disbursement this Period: 1444.50

Memo Item

C. Schlotfeldt, Walt, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2510 N Post Rd

City Anchorage State AK Zip Code 99501

Purpose of Disbursement In-Kind: Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6726

Amount of Each Disbursement this Period: 2779.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 9616.03

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)
True North PAC

A. The Charles Group

Full Name (Last, First, Middle Initial)

Mailing Address 2907 Butterfield Road
Suite 150

City Oak Brook State IL Zip Code 60523

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6556

Amount of Each Disbursement this Period: 500.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	113126.84

**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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial)
A. ALASKANS FOR DON YOUNG

Mailing Address 2504 FAIRBANKS ST

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
Contribution

Candidate Name
YOUNG, DONALD, E., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: AK District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2019

FEC Identification Number

C C00012229
Transaction ID : SB23.6523
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. BEN SASSE FOR US SENATE INC

Mailing Address 700 R ST
UNIT 83978

City LINCOLN State NE Zip Code 68501

Purpose of Disbursement
Contribution

Candidate Name
SASSE, BENJAMIN, E., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: NE District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2019

FEC Identification Number

C C00547976
Transaction ID : SB23.6707
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution

Candidate Name
COLLINS, SUSAN, M., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: ME District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2019

FEC Identification Number

C C00314575
Transaction ID : SB23.6615
Amount of Each Disbursement this Period
5000.00

Memo Item

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

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

15000.00

**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 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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. COTTON FOR SENATE		Date of Disbursement MM / DD / YYYY 12 / 05 / 2019
Mailing Address PO BOX 379		FEC Identification Number C 000499988 Transaction ID : SB23.6750
City DARDANELLE	State AR	Zip Code 72834
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name COTTON, THOMAS, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District: 00	

Full Name (Last, First, Middle Initial) B. JONI FOR IOWA		Date of Disbursement MM / DD / YYYY 12 / 05 / 2019
Mailing Address PO BOX 93441		FEC Identification Number C 000546788 Transaction ID : SB23.6752
City DES MOINES	State IA	Zip Code 50393
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name ERNST, JONI K, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 00	

Full Name (Last, First, Middle Initial) C. MIKE GALLAGHER FOR WISCONSIN		Date of Disbursement MM / DD / YYYY 12 / 18 / 2019
Mailing Address PO BOX 1027		FEC Identification Number C 000610212 Transaction ID : SB23.6716
City GREEN BAY	State WI	Zip Code 54305
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name GALLAGHER, MICHAEL JOHN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WI	District: 08	

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

15000.00

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

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

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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

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NAME OF COMMITTEE (In Full)
True North PAC

A. THOM TILLIS COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 97396

City RALEIGH State NC Zip Code 27624

Purpose of Disbursement Contribution

Candidate Name TILLIS, THOM, R., ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NC District: 00

Date of Disbursement: 12 / 05 / 2019

FEC Identification Number: C00545772
Transaction ID : SB23.6754

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

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	35000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 55 OF 55
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Black Rock Group LLC			Nature of Debt (Purpose): PAC Strategic Consulting
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : SD10.6504	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MKJ, Inc.			Nature of Debt (Purpose): PAC Fundraising Consulting
Mailing Address 5905 Gloster Rd			
City Bethesda	State MD	Zip Code 20816	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.6503	
Amount Incurred This Period 0.00	Payment This Period 5000.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rizzo Dukes Group LLC			Nature of Debt (Purpose): PAC Fundraising Consulting
Mailing Address 1316 Alexandria Ave			
City Alexandria	State VA	Zip Code 22308	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6741	
Amount Incurred This Period 4683.49	Payment This Period 0.00	Outstanding Balance at Close of This Period 4683.49

1) SUBTOTALS This Period This Page (optional)..... ▶	4683.49
2) TOTALS This Period (last page this line number only)..... ▶	4683.49
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	4683.49