PAGE 1 / 15

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For (Other Than A	An Authorized	d Commi	ttee		Office Use	Only	
NAME OF COMMITTEE (in f		OR PRINT ▼		ample: If typer the lines.		12FE4M	[5		
AMERICANS F	OR THE C	URE OF B	REAST CAN	NCER					
ADDRESS (number and		44 COUNTY RE	P M						
Check if diffe than previous reported. (AC	sly , Fi	REDONIA				WI	53021		
2. FEC IDENTIFICA	ATION NUMBE	ER ▼	CITY ▲			STATE A	ZI	IP CODE	A
C C00660233	3		3. IS THIS REPORT		NEW (N) OR	x AN	MENDED)		
4. TYPE OF REP (Choose One) (a) Quarterly Rep		n) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3)	ij	May 20 (M5) Jun 20 (M6)	Sep	20 (M8) 20 (M9)	(Nor Year Dec (Nor Year	v 20 (M11) 1-Election Only) c 20 (M12) 1-Election Only)
July 15 Quarterly October	Report (Q3)	(c) 12-Day PRE-Ele Report f	for the:	Primary (12		General Special	(12S) ii	Rur n the	n 31 (YE)
July 31 M Report (N Year Only	Non-election	(d) 30-Day POST-E Report f		General (3	0G)	Runoff (30R) ii	Speen the State of	ecial (30S)
5. Covering Period	01	01 Y	2018	through	03	31	2018		
I certify that I have ex Type or Print Name of	PI	eport and to the ARO, ROBERT,	e best of my kno	wledge and	d belief it is tru	ue, correct an	d complete.		
Signature of Treasurer	PIARO, RO	OBERT, , ,		[Electronica	ully Filed] [Date 12	/ 18)18
NOTE: Submission of fa	alse, erroneous,	or incomplete in	nformation may su	ubject the pe	erson signing t	his Report to t	he penalties	of 52 U.S	.C. § 3010
Office Use								FORM v. 05/2016	3X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICANS FOR THE CURE OF BREAST CANCER

Report Covering the Period: From: 01 01 2018 To: 03 31 2018

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		0.00
	(b) Cash on Hand at Beginning of Reporting Period	0.00	
	(c) Total Receipts (from Line 19)	187037.00	187037.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	187037.00	187037.00
7.	Total Disbursements (from Line 31)	134775.85	134775.85
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52261.15	52261.15
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	822.63	

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICANS FOR THE CURE OF BREAST CANCER

R	eport Covering the Period: From:	/ 01 / 2018 To	o: 03 / 31 / 2018
	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)	850.00	850.00
	(ii) Unitemized(iii) TOTAL (add	186187.00	186187.00
	Lines 11(a)(i) and (ii)	187037.00	187037.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
40	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	187037.00	187037.00
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds	0.00	0.00
	(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))▶	187037.00	187037.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	187037.00	187037.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures: (a) Allocated Federal/Non-Federal		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating		
Expenditures	134775.85	134775.85
(c) Total Operating Expenditures		
(add 21(a)(i), (a)(ii), and (b))▶	134775.85	134775.85
Transfers to Affiliated/Other Party	0.00	0.00
Committees Contributions to	0.00	0.00
Federal Candidates/Committees	0.00	0.00
and Other Political Committees	0.00	0.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures	0.00	0.00
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
(dae deficación i)	5.00	0.00
Loan Repayments Made	0.00	0.00
Louis riopaymonio wado	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To:	0.00	4 4
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees	7 0.00	45 45
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		7 7
(add Lines 28(a), (b), and (c))	0.00	0.00
(4.2.2 = 1.0.2 = 5(4.7), (4.7), 4.1.4 (5.7)	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
	4 4	4 4
Federal Election Activity (52 U.S.C. § 3010	1(20))	
(a) Allocated Federal Election Activity		
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(") III II OI		
(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
T. (B) () () () () () () ()		
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	134775.85	134775.85
Total Endard Dishuraamanta	7 7 7	
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)		
110111 LITTE 31)	134775.85	134775.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

- (,		
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	187037.00	187037.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	187037.00	187037.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	134775.85	134775.85
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	134775.85	134775.85

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

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

FOR LINE NUMBER:						PAGE	6	OF	15	
(check only one)										
		X	11a		11b		11c	12	2	
			13		14		15	16	6	17

Any information copied from such Reports and S or for commercial purposes, other than using the						
NAME OF COMMITTEE (In Full) AMERICANS FOR THE CURE	OF BREAST CANCER					
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt				
Mailing Address 6011 KENDRICK DR		03 26 2018				
City RIVERSIDE	State Zip Code CA 92507	Transaction ID : SA11AI-163717 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00					
Full Name of Individual (Last, First, Middle Init PENNFIELD, DONALD, , , Mailing Address PO BOX 1687	tial) or Full Organization Name	Date of Receipt				
City HAMPTON	State Zip Code NH 03843	Transaction ID : SA11AI-153271 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	Cocupation (for Individual)	200.00 Memo Item				
Name of Employer (for Individual) Best Efforts	Occupation (for Individual) Best Efforts	Monto Itom				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00					
Full Name of Individual (Last, First, Middle Init	tial) or Full Organization Name	Date of Receipt				
Mailing Address 65523 N CENTERVILLE RD		03 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City STURGIS	State Zip Code MI 49091	Transaction ID : SA11AI-159147 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00					
SUBTOTAL of Receipts This Page (optional)		650.00				
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	:	7	OF	15	
	(check only one)										
		X	11a		11b		11c		12	2	
			13		14		15		16	6	17

or for commercial purposes, other than using	the name and address of any political committee					
NAME OF COMMITTEE (In Full) AMERICANS FOR THE CUR	RE OF BREAST CANCER					
Full Name of Individual (Last, First, Middle WILKINSON, NELSON, , , Mailing Address 1320 ROBIN RD	Initial) or Full Organization Name	Date of Receipt				
City PIKESVILLE	State Zip Code MD 21208	Transaction ID : SA11AI-154657 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	200.00				
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00					
Full Name of Individual (Last, First, Middle 3. Mailing Address	Initial) or Full Organization Name	Date of Receipt				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					
Full Name of Individual (Last, First, Middle	Initial) or Full Organization Name	Date of Receipt				
Mailing Address		M M / D D / Y Y Y Y Y				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C					
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (optional))	200.00				
TOTAL This Period (last page this line numb	per only)	850.00				

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 8 OF					
ITEMIZED DISBURSEMENTS		parate schedule(s) a category of the	(check or	<i>'</i> ′ _	7.00 F	J. 00 .	1 07	
		Summary Page	211				27 30b	
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or for commercial purposes, other than using the r								
NAME OF COMMITTEE (In Full)								
AMERICANS FOR THE CURE C	F BREA	ST CANCER	?					
Full Name (Last, First, Middle Initial)				D-44 F	\:-\:\:\:\:\			
A. American Technology Services L	.LC			M = M)isburseme	/ Y Y	TY TY	
Mailing Address 125 North 2nd Street Unit 110 Box 241				03	07		018	
City	State	Zip Code		FEC Iden	tification N	lumber		
Phoenix Purpose of Disbursement	AZ	85250						
software licensing			001	C				
Candidate Name			Category/	1		: SB21B-1	1971 this Period	
			Type	Amount	Lacii Dis	bursement	tilis i ellou	
Office Sought: House Disburs	sement For:			T L	95	1	337.12	
Senate	Primary	General						
State: District:	Other (sp	ecity) \blacktriangledown		Mem	o Item			
Full Name (Last, First, Middle Initial)								
B. American Technology Services L	I C			Date of D	isburseme	ent		
				M = M / D = D / Y = Y = Y				
Mailing Address 125 North 2nd Street Unit 110 Box 241				03 14 2018				
City	State	Zip Code		FEC Iden	tification N	lumber		
Phoenix Purpose of Disbursement	AZ				C Transaction ID - SP24B 44072			
software licensing								
Candidate Name					Transaction ID : SB21B-11973 Amount of Each Disbursement this Period			
					7075.68			
Office Sought: House Disburs Senate	sement For:							
President	Other (sp	General ecify)						
State: District:	(5)	,,		Mem	o Item			
Full Name (Last, First, Middle Initial)								
C. American Technology Services L	LC			Date of D	Disburseme	_	YYY	
Mailing Address 125 North 2nd Street Unit 110 Box 241				03	21)18	
City	State	Zip Code		EEC Ida-	tification N	lumbor		
Phoenix	AZ	85250		FEC luen	tification N	iumber	_	
Purpose of Disbursement software licensing			001	C	saction ID	: SB21B-1	1974	
Candidate Name			Category/ Type			_	this Period	
Office Sought: House Disburs	sement For:		.,,,,	11.		10	732.16	
Senate	Primary	General			4	7	4	
President	Other (sp	ecify) ▼		Mem	o Item			
State: District:				Ц				
SUBTOTAL of Disbursements This Page (optional)		>		- T	19	9144.96	
	-							
TOTAL This Period (last page this line number or	ılv)			1				

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S	CHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 9 OF 15								
IT	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the			eck c	ily one)					
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	ny information copied from such Reports and Stater for commercial purposes, other than using the name										
01	NAME OF COMMITTEE (In Full)	ne and addi	ess of any politic	ai com	mille	e to solicit contributions from such committee.					
$ \rangle$	AMERICANS FOR THE CURE OF	BDEAG	T CANCED)							
	AMERICANS FOR THE CORE OF	DIVLAG	OFCANCEN	•							
	Full Name (Last, First, Middle Initial)										
Α.	American Technology Services LL	С				Date of Disbursement					
						M M / D D / Y Y Y Y					
	Mailing Address 125 North 2nd Street Unit 110 Box 241					03 28 2018					
		State	Zip Code			TEO Identification Number					
	Phoenix	AZ	85250			FEC Identification Number					
	Purpose of Disbursement software licensing										
				00)1	Transaction ID : SB21B-11977					
	Candidate Name				gory/	Amount of Each Disbursement this Period					
	Office Sought: House Disburser	ment For:		Ту	he	27073.92					
	Senate	Primary	General			4 4					
	President	cify) 🔻			Memo Item						
	State: District:					<u> </u>					
_	Full Name (Last, First, Middle Initial)					B (B) .					
В.	Compliance Consultants LLC					Date of Disbursement					
	Mailing Address 1345 Jefferson St.					03 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
	#454					2510					
	City	FEC Identification Number									
	Milwaukee										
	Purpose of Disbursement credit card payment processing & verifications		Category/ Type			Transaction ID : SB21B-11979 Amount of Each Disbursement this Period					
	Candidate Name										
	Office Sought: House Disburser	ment For:				1897.87					
	Senate	Primary General									
	President State: District:	Other (spec	cify)			Memo Item					
_	Full Name (Last, First, Middle Initial)										
C.	Compliance Consultants LLC					Date of Disbursement					
•	Compliance Consultants LLC					M M / D D / Y Y Y					
	Mailing Address 1345 Jefferson St.					03 14 2018					
	#454		I=								
	City :	State WI	Zip Code 53202			FEC Identification Number					
	Purpose of Disbursement	**1	33202			C					
	credit card payment processing & verifications			00)1	Transaction ID : SB21B-11981					
	Candidate Name			Cate	gory/						
	Office County			Ту	ре	10042.04					
	Office Sought: House Disburser Senate	ment For: Primary	General			10043.04					
	President	Other (spec									
	State: District:	2 (opoc	₹ 3/ ₹			Memo Item					
Г	1										
s	SUBTOTAL of Disbursements This Page (optional)				▶	39014.83					
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I T	OTAL This Period (last page this line number only))				•					

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S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 OF 15					
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only	(check only one)				
-	 		Summary Page	X 21b	22 23 26 27				
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	ly information copied from such Reports and Stater for commercial purposes, other than using the nar								
	NAME OF COMMITTEE (In Full)								
$ \rangle$	AMERICANS FOR THE CURE OF	BREAS	ST CANCER	₹					
_	Full Name (Last, First, Middle Initial)				B				
Α.	Compliance Consultants LLC				Date of Disbursement				
	Mailing Address 1345 Jefferson St. #454				03 21 2018				
	City Milwaukee	State WI	Zip Code 53202		FEC Identification Number				
	Purpose of Disbursement credit card payment processing & verifications			001	C				
	Candidate Name			Category/ Type	Transaction ID: SB21B-11983 Amount of Each Disbursement this Period				
		ment For:		1990	15232.73				
	Senate President	Primary Other (spec	☐ General cify) ▼		Memo Item				
_	State: District:								
В.	Full Name (Last, First, Middle Initial) Compliance Consultants LLC				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	Mailing Address 1345 Jefferson St. #454								
	City Milwaukee		FEC Identification Number						
	Purpose of Disbursement credit card payment processing & verifications			001	C				
	Candidate Name			Category/ Type	Transaction ID : SB21B-11985 Amount of Each Disbursement this Period				
	Office Sought: House Disburse	ment For:		1,700	38427.59				
	Senate President	Primary Other (spec	General						
_	State: District:	(-1-			Memo Item				
C.	Full Name (Last, First, Middle Initial) PNC BANK				Date of Disbursement				
	Mailing Address PO Box 609				01 02 7 2018				
	Pittsburgh	State PA	Zip Code 15230-9738		FEC Identification Number				
	Purpose of Disbursement PNC Bank Fees/Merchant Discount			001	C Transaction ID : SB21B-1199!				
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
	Office Sought: House Disburser Senate	ment For: Primary	General		312.00				
	President State: District:	Other (spec			Memo Item				
Г	District.				_				
۱ ,	UBTOTAL of Disbursements This Page (optional)				53972.32				
H					1 1 1 1 1 1 1 1 1				
1 7	OTAL This Period (last nage this line number only))							

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S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 11 OF 15											
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			Summary Page	 	21b 28a	22 28b		23 28c	26 29		30b				
Δι	ny information copied from such Reports and Stater	nente may n	not he sold or us	ed by any						ina c		ons			
	for commercial purposes, other than using the name														
\setminus	NAME OF COMMITTEE (In Full)														
	AMERICANS FOR THE CURE OF	BREAS	T CANCER	2											
_	Full Name (Last, First, Middle Initial)			B (B) .											
Α.	PNC BANK	Date of Disbursement													
	Mailing Address PO Box 609		02 02 2018												
	,	State Zip Code PA 15230-9738				FEC Identification Number									
	Pittsburgh Purpose of Disbursement					C									
	PNC Bank Fees/Merchant Discount														
	Candidate Name		001 Category/						_	: SB21B-11997 sbursement this Period					
				Type											
	Office Sought: House Disburser				31.50						'				
	Senate President	Primary General Other (specify) ▼													
	State: District:	Cirioi (opoo	y) \			Me	emo Ite	em							
	Full Name (Last, First, Middle Initial)														
В.	PNC BANK							Date of Disbursement							
	Mailing Address PO Box 609						03 02 2018								
	au. 9 , add ood FO DOX 003						00 02 2010					_			
	City State Zip Code					FEC Identification Number									
	Pittsburgh PA 15230-9738 Purpose of Disbursement														
	PNC Bank Fees/Merchant Discount	001		C											
	Candidate Name		Catego	rv/	Transaction ID : SB21B-12001 Amount of Each Disbursement this Period						eriod				
					.,.										
	Office Sought: House Disburser	Conoral			31.74										
	Senate Primary General President Other (specify)					п									
	State: District:	(-p	,,			Me	emo Ite	em							
	Full Name (Last, First, Middle Initial)														
C.	PNC BANK							Date of Disbursement							
	Mailing Address PO Box 609						03 19 2018								
	maining / Mariood O DOX 000							2010							
		State Zip Code					FEC Identification Number								
	Pittsburgh PA 15230-9738 Purpose of Disbursement						-	_		_	-				
	Deposit Amount Returned/Return Deposit Item 001						Transaction ID : SB21B-1200: Amount of Each Disbursement this Period								
	Candidate Name Category/														
	Office County		-	-	-	_	E0.00								
	Office Sought: House Disburser Senate			50.00											
	President						Memo Item								
	State: District:			Me	emo Ite	em									
Г	•						-	-	-	-	1	$\overline{\neg}$			
[5	SUBTOTAL of Disbursements This Page (optional)				• •						113.2	4			
,	OTAL This Period (last page this line number only)				_										
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	EDULE B (FEC Form 3X)	Han see	FOR LINE NUMBER: PAGE 12 OF 15										
ITEN	TEMIZED DISBURSEMENTS Use separate schedule(s for each category of the			I `	(check only one)								
			Summary Page		28a	28b	23 28c	26	30b				
Any ii	nformation copied from such Reports and State	ments may	not be sold or us	ed by any	pers	on for the	purpose	of soliciting	ng contributi	ons			
	commercial purposes, other than using the na												
I \	ME OF COMMITTEE (In Full)												
/ A	MERICANS FOR THE CURE OF	- BREAS	ST CANCER										
	Il Name (Last, First, Middle Initial)												
A . P	PNC BANK							Date of Disbursement					
Ma	Mailing Address PO Box 609						03 19 2018						
_	-												
Cit Pit	y tsburgh	State PA			FEC Id	entificatio	n Number	r					
Pu	rpose of Disbursement		PA 15230-9738				C						
	eposit Amount Returned/Return Deposit Item					Transaction ID : SB21B-12005							
Ca	Indidate Name			Catego Type	Category/	Amount of Each Disbursement this Period							
Of	fice Sought: House Disburse	ment For:				35.00)						
	Senate	Primary	General										
Sta	President Other (specify) ▼ ate: District:					Me	mo Item						
	Il Name (Last, First, Middle Initial)												
	NC BANK	Date of Disbursement											
	Matter Address 7.2						M M / D D / Y Y Y Y						
IVI	Mailing Address PO Box 609							03 22 2018					
	City State Zip Code						FEC Identification Number						
	Pittsburgh PA 15230-9738 Purpose of Disbursement												
	Deposit Amount Returned/Chargeback 001						C Transaction ID : SB21B-12007						
Ca	Candidate Name					Amount of Each Disbursement this Period							
Of	fice Sought: House Disburse	Туре		35.00									
· · ·	Senate Primary General President Other (specify)					4							
0.						Memo Item							
	ate: District: Il Name (Last, First, Middle Initial)												
	NC BANK					Date o	f Disburs	ement					
_							M M / D D / Y Y Y Y						
Ma	ailing Address PO Box 609		03 23 2018										
Cit	у	Zip Code	FEC Identification Number										
	tsburgh rpose of Disbursement												
	Deposit Amount Returned/Chargeback 001						Transaction ID : SB21B-12009						
Ca	Candidate Name Category/							_	ment this P	eriod			
Of	Office Sought: House Disbursement For:								35.00	1			
Oil	Senate Disbulsement For. Senate Primary General						7		00.00				
	President	Other (spe	ecify) 🔻			Me Me	mo Item						
Sta	ate: District:												
SIIB	TOTAL of Disbursements This Page (optional).								105.0	0			
308	TOTAL OF DISDUISORIENTS THIS Fage (Optional).				_	-	7			#			
Тот	AL This Period (last page this line number only	·)					_						

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S	CHEDULE B (FEC Form 3X)	11			FOR LINE NUMBER: PAGE 13 OF)F 15			
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			Summary Page		X	21b 28a	22 28b		23 28c	2		27 30b			
Δ.	over information, assign from such Departs and Chate														
	ny information copied from such Reports and State for commercial purposes, other than using the na														
\setminus	NAME OF COMMITTEE (In Full)														
$ \rangle$	AMERICANS FOR THE CURE OF	BREAS	ST CANCER	₹											
Α.	Full Name (Last, First, Middle Initial)						Date o	f Die	hurear	mont					
Λ.	PNC BANK							Date of Disbursement							
	Mailing Address PO Box 609						03 30 2018								
	City	State					FEC Identification Number								
	Pittsburgh Purpose of Disbursement	PA	15230-9738						_	-	_	-			
	Deposit Amount Returned/Chargeback			001			C								
	Candidate Name		Categ				Transaction ID : SB21B-12011 Amount of Each Disbursement this Period								
					ype	y,	, anoun		Laon	il Disbursement this Feriod					
		ment For:	Primary General					40.00							
	Senate	,													
	State: District:	President						emo	Item						
_	Full Name (Last, First, Middle Initial)														
В.	Unified Data Services LLC								burser	ment					
						M M / D D / Y Y Y									
	Mailing Address 1350 W. Southport Road						03 07 2018								
	Box 130 City State Zip Code														
	Indianapolis TN 46217						FEC Identification Number								
	Purpose of Disbursement							C							
	mailers databasing and caging Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General							ansa	ction I	D : SI	B21B	-11987			
							Amount of Each Disbursement th						Period		
							647.40								
								7 7							
	President Other (specify)						П		ltom						
	State: District:	ı					IVIE	emo	item						
	Full Name (Last, First, Middle Initial)														
C.	Unified Data Services LLC							Date of Disbursement							
	Mailing Address 1350 W. Southport Road					-	03	′	14	_		2018	Y		
	Box 130								2010						
	City	State	Zip Code				FEC Io	lentif	ication	Num	ber				
	Indianapolis Purpose of Disbursement														
	mailers databasing and caging 003						C								
	Candidate Name Category/						Transaction ID : SB21B-11989 Amount of Each Disbursement this Period					Period			
				ype	y'	Amount of Lacif Disbursement this Period									
	Office Sought:										,	3424.2	0		
	Senate	Primary	General												
	Tate: District: Other (specify) ▼						Me	emo	Item						
	State: District:						_								
١,	SUBTOTAL of Disbursements This Page (optional).											4111.6	60		
F							-	-	1	#		1 70			
lτ	OTAL This Period (last page this line number only	·)								_					

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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 14 OF 15								
ITEMIZED DISBURSEMENTS		parate schedule(s)	(check on	HOMBER:							
TILIMIZED DIODONOLINENTO		n category of the discussions and Summary Page	` X 21b	· ·							
	Dotaile		28a	28b 28c 29 30b							
Any information copied from such Reports and Stator for commercial purposes, other than using the n											
NAME OF COMMITTEE (In Full)											
AMERICANS FOR THE CURE C	F BREA	ST CANCER	₹								
Full Name (Last, First, Middle Initial)											
A. Unified Data Services LLC											
Mailing Address 1350 W. Southport Road Box 130	03 21 2018										
City Indianapolis	State TN	Zip Code 46217		FEC Identification Number							
Purpose of Disbursement	111	40217		C							
mailers databasing and caging			003								
Candidate Name			Category/	Transaction ID : SB21B-11991 Amount of Each Disbursement this Period							
			Type								
	sement For:			5194.80							
Senate President	Primary Other (en	General									
State: District:	Other (sp	ecity) \blacktriangledown		Memo Item							
Full Name (Last, First, Middle Initial)											
B. Unified Data Services LLC	•										
Omnod Bala Colvicos EEC				M M / D D / Y Y Y Y							
Mailing Address 1350 W. Southport Road Box 130	03 28 2018										
City	State	Zip Code		FEC Identification Number							
Indianapolis Purpose of Disbursement	Indianapolis TN 46217										
mailers databasing and caging											
Candidate Name		Transaction ID : SB21B-11993									
	Category/ Type	Amount of Each Disbursement this Period									
Office Sought: House Disburs		13100.10									
Senate		7 7 7									
President	Memo Item										
State: District: Full Name (Last, First, Middle Initial)				_							
C.				Date of Disbursement							
				M = M / D = D / Y = Y = Y							
Mailing Address											
City	ty State Zip Code										
Purpose of Disbursement	Purpose of Disbursement										
	C										
Candidate Name	Amount of Each Disbursement this Period										
Office Sought: House Disburs	Office Sought: Disbursement For:										
Senate											
President Pictriot:	Other (sp	ecify) ▼		Memo Item							
State: District:											
SUBTOTAL of Disbursements This Page (optional)			18294.90							
	,										
TOTAL This Period (last page this line number on	ıly)			134756.85							

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 15 OF FOR LINE NUMBER:

9 (check only one) **X** 10

15

NAME OF COMMITTEE (In Full) AMERICANS FOR THE CURE OF E	REAST C	CANCER					
A. Full Name (Last, First, Middle Initial) of Debto PNC Bank Mailing Address PO Box 609	Nature of Debt (Purpose): Business Credit Card						
Mailing Address PO Box 609							
City Pittsburgh	State PA	Zip Code 15230-9738					
Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period						
7 7 7							
841.63	Ta	Outstanding Balance at Close of This Period 822.63					
B. Full Name (Last, First, Middle Initial) of Debtor	3. Full Name (Last, First, Middle Initial) of Debtor or Creditor						
Mailing Address	Mailing Address						
City	State	Zip Code					
Outstanding Balance Beginning This Period Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period				
C. Full Name (Last, First, Middle Initial) of Debto	. Full Name (Last, First, Middle Initial) of Debtor or Creditor						
Mailing Address	Mailing Address						
City	State	Zip Code					
Outstanding Balance Beginning This Period Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period				
1) SUBTOTALS This Period This Page (optional)			822.63				
2) TOTALS This Period (last page this line number	TOTALS This Period (last page this line number only)						
3) TOTAL OUTSTANDING LOANS from Schedule	0.00						
4) ADD 2) and 3) and carry forward to appropriate	1) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)						