

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) PO BOX 1053 BLOOMINGTON IN 47402 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00551853 3. IS THIS REPORT NEW OR AMENDED (N) (A) [X]

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (selected), July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

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

Signature of Treasurer WUSLICH, JEFF, , , [Electronically Filed] Date 01 / 31 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		299071.18
(b) Cash on Hand at Beginning of Reporting Period.....	201310.63	
(c) Total Receipts (from Line 19) .....	170472.94	222233.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	371783.57	521304.92
7. Total Disbursements (from Line 31).....	169234.61	318755.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	202548.96	202548.96
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	6700.00	6700.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	6700.00	6700.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	112050.00	147550.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	118750.00	154250.00
12. Transfers From Affiliated/Other Party Committees.....	51175.14	67435.94
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).....	547.80	547.80
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	170472.94	222233.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	170472.94	222233.74

**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 .....	115234.61	179755.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	115234.61	179755.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	45000.00	85000.00
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).....	9000.00	54000.00
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)) ..	169234.61	318755.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	169234.61	318755.96

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	118750.00	154250.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	118750.00	154250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	115234.61	179755.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	547.80	547.80
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	114686.81	179208.16

**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 56
	<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	

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

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

**A. KIMBELL, JEFFREY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 601 13TH STREET NW, SUITE 650 NORT  
 City WASHINGTON State DC Zip Code 20005-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) HEALTH CARE CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1500.00

Date of Receipt 10 / 25 / 2017  
**Transaction ID : SA11A.39646**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item CONTRIBUTION

**B. SUTTER, BRIAN, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 HILTON ST  
 City ALEXANDRIA State VA Zip Code 22314-4972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITOL HILL CONSULTING GROUP Occupation (for Individual) SENIOR V.P.  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2500.00

Date of Receipt 10 / 31 / 2017  
**Transaction ID : SA11A.39635**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**C. POKAGON BAND OF POTAWATOMI INDIANS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58620 SINK ROAD  
 City DOWAGIAC State MI Zip Code 49047-9329  
 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 2700.00

Date of Receipt 12 / 31 / 2017  
**Transaction ID : SA11A.39741**  
 Amount of Each Receipt this Period 2700.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6700.00
<b>TOTAL</b> This Period (last page this line number only).....	6700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ABBOTT LABORATORIES EMPLOYEE PAC**

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

Mailing Address 100 ABBOTT PARK ROAD  
# D312

City ABBOTT PARK	State IL	Zip Code 60064-3502
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FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer (for Individual)	Occupation (for Individual)
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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
11	/	13	/	2017

**Transaction ID : SA11C.39652**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. ABBVIE PAC**

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

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064-1802
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FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2017

**Transaction ID : SA11C.39698**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. AMERICAN ASSOCIATION OF NURSE PRACTITIONERS PAC**

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

Mailing Address 225 REINEKERS LN  
SUITE 525

City ALEXANDRIA	State VA	Zip Code 22314-2880
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FEC ID number of contributing federal political committee. **C** C00358903

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2017

**Transaction ID : SA11C.39707**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. AMERICAN GASTROENTEROLOGICAL ASSOCIATION PAC**

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

Mailing Address 4926 DEL RAY AVENUE

City BETHESDA	State MD	Zip Code 20814-2512
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FEC ID number of contributing federal political committee. **C** C00423228

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

**Transaction ID : SA11C.39618**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN OPTOMETRIC ASSOCIATION PAC**

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

Mailing Address 1505 PRINCE STREET  
SUITE 300

City ALEXANDRIA	State VA	Zip Code 22314-2874
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FEC ID number of contributing federal political committee. **C** C00024968

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2017

**Transaction ID : SA11C.39683**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**C. AT&T INC. FEDERAL PAC**

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

Mailing Address 208 S. AKARD STREET  
FRONT 2701

City DALLAS	State TX	Zip Code 75202-4295
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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  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2017

**Transaction ID : SA11C.39630**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. BNSF RAILWAY COMPANY RAILPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 961039

City FORT WORTH	State TX	Zip Code 76161-0039
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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  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	27	/	2017

**Transaction ID : SA11C.39701**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. BOSTON SCIENTIFIC CORPORATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 300 BOSTON SCIENTIFIC WAY

City MARLBOROUGH	State MA	Zip Code 01752-1291
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FEC ID number of contributing federal political committee. **C** C00357863

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	/	31	/	2017

**Transaction ID : SA11C.39742**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. DELOITTE FEDERAL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 365

City WASHINGTON	State DC	Zip Code 20044-0365
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FEC ID number of contributing federal political committee. **C** C00211318

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	21	/	2017

**Transaction ID : SA11C.39697**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ECHOSTAR CORP. AND DISH NETWORK CORP. PAC**

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

Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City WASHINGTON	State DC	Zip Code 20005-6322
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FEC ID number of contributing federal political committee. **C** C00330647

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	/	21	/	2017

**Transaction ID : SA11C.39667**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC (ENGPAC)**

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

Mailing Address 3699 WILSHIRE BOULEVARD SUITE 1290

City LOS ANGELES	State CA	Zip Code 90010-2732
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FEC ID number of contributing federal political committee. **C** C00088591

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	/	29	/	2017

**Transaction ID : SA11C.39703**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. FEDEX CORPORATION PAC**

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

Mailing Address 942 S. SHADY GROVE ROAD 1ST FL.

City MEMPHIS	State TN	Zip Code 38120-4117
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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
12	/	27	/	2017

**Transaction ID : SA11C.39700**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. GENERAL MOTORS COMPANY PAC**

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

Mailing Address 25 MASSACHUSETTS AVENUE NW  
SUITE 400

City WASHINGTON State DC Zip Code 20001-1427

FEC ID number of contributing federal political committee. **C** C00076810

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2017

**Transaction ID : SA11C.39632**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. HONEYWELL INTERNATIONAL PAC**

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

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 500

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

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 / 31 / 2017

**Transaction ID : SA11C.39740**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. HUMANA INC. PAC**

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

Mailing Address 975 F STREET NW  
SUITE 550

City WASHINGTON State DC Zip Code 20004-1458

FEC ID number of contributing federal political committee. **C** C00271007

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 03 / 2017

**Transaction ID : SA11C.39606**

Amount of Each Receipt this Period  
3500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. HUMANA INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 F STREET NW  
SUITE 550

City WASHINGTON State DC Zip Code 20004-1458

FEC ID number of contributing federal political committee. **C** C00271007

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 / 21 / 2017

**Transaction ID : SA11C.39695**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON State DC Zip Code 20001-6707

FEC ID number of contributing federal political committee. **C** C00022343

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  
12 / 21 / 2017

**Transaction ID : SA11C.39696**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. KOCH INDUSTRIES INC PAC (KOCHPAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 600 14TH STREET NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

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 / 16 / 2017

**Transaction ID : SA11C.39686**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. KOCH INDUSTRIES INC PAC (KOCHPAC)**

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

Mailing Address 600 14TH STREET NW  
SUITE 800

City WASHINGTON State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

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 / 31 / 2017

**Transaction ID : SA11C.39739**

Amount of Each Receipt this Period  
4000.00

Memo Item  
CONTRIBUTION

**B. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC**

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

Mailing Address PO BOX 75000

City DETROIT State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00496307

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 / 18 / 2017

**Transaction ID : SA11C.39554**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY PAC (MMPAC)**

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

Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111-0001

FEC ID number of contributing federal political committee. **C** C00118943

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 / 13 / 2017

**Transaction ID : SA11C.39651**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. MCKESSON CORPORATION EMPLOYEES POLITICAL FUND**

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

Mailing Address 1 POST STREET  
FLOOR 32

City SAN FRANCISCO State CA Zip Code 94104-5255

FEC ID number of contributing federal political committee. **C** C00108035

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 12 / 11 / 2017

**Transaction ID : SA11C.39682**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. MOTOROLA SOLUTIONS INC. PAC**

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

Mailing Address 1455 PENNSYLVANIA AVENUE, NW  
SUITE 900

City WASHINGTON State DC Zip Code 20004-1016

FEC ID number of contributing federal political committee. **C** C00075341

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 /  D  D /  Y  Y  Y  Y  
 12 / 11 / 2017

**Transaction ID : SA11C.39685**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL APARTMENT ASSOCIATION PAC**

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

Mailing Address 4300 WILSON BOULEVARD  
SUITE 400

City ARLINGTON State VA Zip Code 22203-4168

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2700.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 09 / 18 / 2017

**Transaction ID : SA11C.39553**

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. NATIONAL ASSOC. OF REAL ESTATE INVESTMENT TRUSTS, INC. PAC**

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

Mailing Address 1875 I STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
11 / 13 / 2017  
**Transaction ID : SA11C.39650**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)**

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

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 04 / 2017  
**Transaction ID : SA11C.39675**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. NATIONAL ASSOCIATION OF BROADCASTERS PAC (NABPAC)**

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

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 29 / 2017  
**Transaction ID : SA11C.39704**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC (NACSPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 DUKE STREET  
 City ALEXANDRIA State VA Zip Code 22314-3466  
 FEC ID number of contributing federal political committee. **C** C00126763  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 29 / 2017**  
**Transaction ID : SA11C.39705**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. NAVIENT PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 EDMUND HALLEY DR.  
 City RESTON State VA Zip Code 20191-3436  
 FEC ID number of contributing federal political committee. **C** C00331835  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt **10 / 31 / 2017**  
**Transaction ID : SA11C.39636**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item  
**CONTRIBUTION**

**C. ROCHE INC. GOOD GOVERNMENT COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 340 KINGSLAND STREET  
 City NUTLEY State NJ Zip Code 07110-1150  
 FEC ID number of contributing federal political committee. **C** C00072769  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 31 / 2017**  
**Transaction ID : SA11C.39743**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. T-MOBILE 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 20004-2710
--------------------	-------------	------------------------

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 ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 11 / 2017

**Transaction ID : SA11C.39684**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. UNITED PARCEL SERVICE INC. PAC - UPS PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PARKWAY

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

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  
08 / 08 / 2017

**Transaction ID : SA11C.39514**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. UNITED PARCEL SERVICE INC. PAC - UPS PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PARKWAY

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

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  
10 / 25 / 2017

**Transaction ID : SA11C.39631**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 56
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. UNITEDHEALTH GROUP PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 PENNSYLVANIA AVE NW STE 200

City WASHINGTON	State DC	Zip Code 20004-3610
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00274431

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	/	29	/	2017

**Transaction ID : SA11C.39706**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

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

Mailing Address 10101 WOODLOCH FOREST DRIVE

City THE WOODLANDS	State TX	Zip Code 77380-1975
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00339655

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2017

**Transaction ID : SA11C.39664**

Amount of Each Receipt this Period  
1850.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6850.00
<b>TOTAL</b> This Period (last page this line number only).....▶	112050.00

**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 19 OF 56
<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

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

**A. INDIANA PROSPERITY COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4703 WOODWAY LANE, NW

City WASHINGTON	State DC	Zip Code 20016-3240
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FEC ID number of contributing federal political committee. **C** C00653683

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
11500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

**Transaction ID : SA12.39710**

Amount of Each Receipt this Period  
11500.00

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. CASEY, DENNIS, W., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11261 MIRADOR LANE

City FISHERS	State IN	Zip Code 46037-8680
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
SUNNYSLOPE CONSULTING LLC OWNER

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	/	26	/	2017

**Transaction ID : SA12.39714**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER  
JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

Mailing Address 1001 L STREET APT 610

City WASHINGTON	State DC	Zip Code 20001-6308
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
VP FEDERAL AFFAIRS RITE AID

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2017

**Transaction ID : SA12.39719**

Amount of Each Receipt this Period  
250.00

Memo Item  
TRANSFER  
JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 56
<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

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

**A. IRIZARRY, STEVEN, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2144 N. POLLARD ST.

City ARLINGTON	State VA	Zip Code 22207-3812
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ROBERTI GLOBAL	Occupation (for Individual) MANAGING PARTNER
-----------------------------------------------------	-------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

**Transaction ID : SA12.39720**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

Mailing Address 555 12TH STREET

City WASHINGTON	State DC	Zip Code 22101-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) LUGAR HELLMANN GROUP LLC	Occupation (for Individual) PUBLIC AFFAIRS
---------------------------------------------------------------	-----------------------------------------------

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
12	/	19	/	2017

**Transaction ID : SA12.39722**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

Mailing Address 5305 LITTLE FALLS RD

City ARLINGTON	State VA	Zip Code 22207-1521
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WEXLER WALKER	Occupation (for Individual) CEO
----------------------------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2017

**Transaction ID : SA12.39718**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 56
<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

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

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

Mailing Address 316 MAIN ST APT 2

City WAKEFIELD	State MA	Zip Code 01880-5022
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WYNN BOSTON HARBOR	Occupation (for Individual) DIRECTOR OF COMMUNITY RELATIC
---------------------------------------------------------	--------------------------------------------------------------

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	/	26	/	2017

**Transaction ID : SA12.39713**

Amount of Each Receipt this Period  
2000.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

**B. COUNCIL OF INSURANCE AGENTS & BROKERS PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 PENNSYLVANIA AVE NW STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00039578

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	/	26	/	2017

**Transaction ID : SA12.39715**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

Mailing Address 550 S. TRYON STREET DEC37D

City CHARLOTTE	State NC	Zip Code 28202-4200
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00083535

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2017

**Transaction ID : SA12.39717**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 56
<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

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

**A. HALL RENDER KILLIAN HEATH & LYMAN PC EMPLOYEE PAC**

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

Mailing Address 1 AMERICAN SQUARE  
SUITE 2000

City INDIANAPOLIS State IN Zip Code 46282-0004

FEC ID number of contributing federal political committee. **C** C00552083

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2017

**Transaction ID : SA12.39711**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

**B. NATIONAL CONFECTIONERS ASSOCIATION PAC**

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

Mailing Address 1101 30TH ST NW

City WASHINGTON State DC Zip Code 20007-3708

FEC ID number of contributing federal political committee. **C** C00003855

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
12 / 14 / 2017

**Transaction ID : SA12.39721**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

**C. RITE AID CORPORATION PAC**

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

Mailing Address 30 HUNTER LANE

City CAMP HILL State PA Zip Code 17011-2400

FEC ID number of contributing federal political committee. **C** C00104083

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2017

**Transaction ID : SA12.39716**

Amount of Each Receipt this Period  
750.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 56
<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

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

**A. TWENTY-FIRST CENTURY FOX, INC. PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 400 NORTH CAPITOL ST NW

City WASHINGTON	State DC	Zip Code 20001-1511
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00330019

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	/	03	/	2017

**Transaction ID : SA12.39712**

Amount of Each Receipt this Period  
2500.00

Memo Item  
TRANSFER

JFC ATTRIB: INDIANA PROSPERITY COMMITTEE

**B. YOUNG HOOSIER VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402-1053
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55935.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2017

**Transaction ID : SA12.39517**

Amount of Each Receipt this Period  
18283.00

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**C. MUTZ, GREGORY, T., MR.,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 456 W HURON STREET

City CHICAGO	State IL	Zip Code 60654-3495
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
AMLI RESIDENTIAL CHAIRMAN & 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
06	/	26	/	2017

**Transaction ID : SA.39478.7.1702**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18283.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 56
<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

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

**A. PFAU, NORMAN, E., , JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2703 UTICA PIKE

City JEFFERSONVILLE	State IN	Zip Code 47130-5251
------------------------	-------------	------------------------

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

Name of Employer (for Individual) GEO PFAU & SONS CO.	Occupation (for Individual) C.E.O. AND PRESIDENT
----------------------------------------------------------	-----------------------------------------------------

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	/	21	/	2017

**Transaction ID : SA.39498.7.1702**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**B. RECHTER, RICHARD, P., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 890 S WOODSCREST DRIVE

City BLOOMINGTON	State IN	Zip Code 47401-5420
---------------------	-------------	------------------------

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

Name of Employer (for Individual) ROGERS GROUP INC.	Occupation (for Individual) OWNER
--------------------------------------------------------	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2017

**Transaction ID : SA.39477.7.1702**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

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

Mailing Address 8877 PICKWICK DRIVE

City INDIANAPOLIS	State IN	Zip Code 46260-1709
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	27	/	2017

**Transaction ID : SA.39508.7.1702**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 56
<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

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

**A. YOUNG HOOSIER VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402-1053
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55935.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2017

**Transaction ID : SA12.39588**

Amount of Each Receipt this Period  
8865.78

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. ROSE, DOUGLAS, C., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 10550 HUSSEY LANE

City CARMEL	State IN	Zip Code 46032-7921
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
IRWIN R. ROSE & CO., LLC REAL ESTATE INVESTMENTS

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		05		2017

**Transaction ID : SA.39551.7.1703**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C. THIRY, KENT, J., MR.,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2 CANTITOE LANE

City ENGLEWOOD	State CO	Zip Code 80113-6111
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
DAVITA 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
09		01		2017

**Transaction ID : SA.39547.7.1703**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8865.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 56
<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

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

**A. YOUNG HOOSIER VICTORY FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 1053

City BLOOMINGTON	State IN	Zip Code 47402-1053
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
55935.94

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2017

**Transaction ID : SA12.39656**

Amount of Each Receipt this Period  
12526.36

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. BARTH, ANDREW, F., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2200 CHAUCER ROAD

City SAN MARINO	State CA	Zip Code 91108-1314
--------------------	-------------	------------------------

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

Name of Employer (for Individual) THE CAPITAL GROUP COMPANIES	Occupation (for Individual) INVESTMENT MANAGEMENT
------------------------------------------------------------------	------------------------------------------------------

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	/	2017

**Transaction ID : SA.39604.7.1704**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**C. ELMORE, DAVID, GANT, MR., JR.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 304 W KIRKWOOD AVENUE

City BLOOMINGTON	State IN	Zip Code 47404-5130
---------------------	-------------	------------------------

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

Name of Employer (for Individual) GANT TRAVEL MANAGEMENT	Occupation (for Individual) BUSINESS OWNER
-------------------------------------------------------------	-----------------------------------------------

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	/	13	/	2017

**Transaction ID : SA.39653.7.1704**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12526.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 56
<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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
FUSSNER, CHRISTOPHER, JOHN, MR.,

Mailing Address 1860 N. SPIRIT DANCE ROAD #3103

City JACKSON HOLE	State WY	Zip Code 83001-9011
----------------------	-------------	------------------------

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

Name of Employer (for Individual) TRANSTECHNOLOGY PTE LTD	Occupation (for Individual) PRESIDENT
--------------------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		01		2017

**Transaction ID : SA.39643.7.1704**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

**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)
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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

**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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	51175.14

**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 28 OF 56
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. UNITED AIRLINES, INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS	State IN	Zip Code 46268-3149
----------------------	-------------	------------------------

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 ▼  
547.80

Date of Receipt  

M M	/	D D	/	Y Y Y Y
08		03		2017

**Transaction ID : SA15.7511**

Amount of Each Receipt this Period  
131.60

Memo Item  
REFUND: TRAVEL

**B. UNITED AIRLINES, INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS	State IN	Zip Code 46268-3149
----------------------	-------------	------------------------

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 ▼  
547.80

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		13		2017

**Transaction ID : SA15.7740**

Amount of Each Receipt this Period  
416.20

Memo Item  
REFUND: TRAVEL

**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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	547.80
<b>TOTAL</b> This Period (last page this line number only).....	547.80

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7503

Amount of Each Disbursement this Period: 8.52

Memo Item

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7505

Amount of Each Disbursement this Period: 173.20

Memo Item

**C. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7688

Amount of Each Disbursement this Period: 367.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 549.52

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 10 / 27 / 2017
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7701</b> Amount of Each Disbursement this Period 246.20
City FORT WORTH	State TX	Zip Code 76155-2605
Purpose of Disbursement TRAVEL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BRABENDERCox, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address 1218 GRANDVIEW AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7704</b> Amount of Each Disbursement this Period 329.00
City PITTSBURGH	State PA	Zip Code 15211-1239
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7387</b> Amount of Each Disbursement this Period 1503.25
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2078.45
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7390</b> Amount of Each Disbursement this Period [ ] 1502.68
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7499</b> Amount of Each Disbursement this Period [ ] 1529.77
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7523</b> Amount of Each Disbursement this Period [ ] 1503.04
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4535.49
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7690</b> Amount of Each Disbursement this Period [ ] 1537.09
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7707</b> Amount of Each Disbursement this Period [ ] 1501.34
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2017
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7864</b> Amount of Each Disbursement this Period [ ] 1513.35
City GREEN COVE SPRINGS	State FL	Zip Code 32043
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 4551.78
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CHARLIE PALMER STEAK</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2017
Mailing Address 101 CONSTITUTION AVENUE NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7730</b> Amount of Each Disbursement this Period [REDACTED] 365.80
City WASHINGTON	State DC	Zip Code 20001-2133
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CHARLIE PALMER STEAK</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2017
Mailing Address 101 CONSTITUTION AVENUE NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7738</b> Amount of Each Disbursement this Period [REDACTED] 262.90
City WASHINGTON	State DC	Zip Code 20001-2133
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHOP'S WINE BAR</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017
Mailing Address 6417 W JEFFERSON BLVD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7698</b> Amount of Each Disbursement this Period [REDACTED] 425.74
City FORT WAYNE	State IN	Zip Code 46804
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1054.44
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

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

Date of Disbursement

/  /   
07 / 11 / 2017

FEC Identification Number

**C**  
**Transaction ID : SB21B.I7484**  
Amount of Each Disbursement this Period  
 125.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

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

Date of Disbursement

/  /   
08 / 08 / 2017

FEC Identification Number

**C**  
**Transaction ID : SB21B.I7517**  
Amount of Each Disbursement this Period  
 125.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

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

Date of Disbursement

/  /   
09 / 11 / 2017

FEC Identification Number

**C**  
**Transaction ID : SB21B.I7530**  
Amount of Each Disbursement this Period  
 125.00

Memo Item

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

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

375.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7696

Amount of Each Disbursement this Period: 125.00

Memo Item

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7715

Amount of Each Disbursement this Period: 125.00

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 08 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7870

Amount of Each Disbursement this Period: 125.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 375.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. EC CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 18 / 2017	
Mailing Address 526 6TH STREET SE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7490</b> Amount of Each Disbursement this Period 2100.00	
City WASHINGTON	State DC	Zip Code 20003-2705	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. EC CONSULTING, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2017	
Mailing Address 526 6TH STREET SE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7718</b> Amount of Each Disbursement this Period 7834.82	
City WASHINGTON	State DC	Zip Code 20003-2705	Category/ Type
Purpose of Disbursement FINANCE CONSULTING		Memo Item <input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ENTERPRISE RENT-A-CAR</b>		Date of Disbursement MM / DD / YYYY 07 / 17 / 2017	
Mailing Address 600 CORPORATE PARK DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7496</b> Amount of Each Disbursement this Period 520.05	
City SAINT LOUIS	State MO	Zip Code 63105-4204	Category/ Type
Purpose of Disbursement TRAVEL		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10454.87
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ENTERPRISE RENT-A-CAR**

Full Name (Last, First, Middle Initial)

Mailing Address 600 CORPORATE PARK DRIVE

City SAINT LOUIS State MO Zip Code 63105-4204

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 31 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7502

Amount of Each Disbursement this Period: 7.95

Memo Item

**B. JOE'S SEAFOOD, PRIME STEAK & STONE CRAB**

Full Name (Last, First, Middle Initial)

Mailing Address 750 15TH ST NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7716

Amount of Each Disbursement this Period: 1148.52

Memo Item

**C. JONES DAY**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7805

City WASHINGTON State DC Zip Code 20044-7805

Purpose of Disbursement LEGAL CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7386

Amount of Each Disbursement this Period: 375.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1531.47

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. LIMESTONE STRATEGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7385

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. LIMESTONE STRATEGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7389

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. LIMESTONE STRATEGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4

City INDIANAPOLIS State IN Zip Code 46250-4346

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 18 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7491

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2017
Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7520</b> Amount of Each Disbursement this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250-4346
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 09 / 20 / 2017
Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7533</b> Amount of Each Disbursement this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250-4346
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7706</b> Amount of Each Disbursement this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250-4346
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	15000.00
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2017
Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7863</b> Amount of Each Disbursement this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250-4346
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. LIMESTONE STRATEGIES</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2017
Mailing Address 5975 CASTLE CREEK PKWY N DR, STE 4		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7875</b> Amount of Each Disbursement this Period 5000.00
City INDIANAPOLIS	State IN	Zip Code 46250-4346
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7522</b> Amount of Each Disbursement this Period 8000.00
City BLOOMINGTON	State IN	Zip Code 47401-6054
Purpose of Disbursement FINANCE CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18000.00
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7526</b> Amount of Each Disbursement this Period 2044.20	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Category/ Type
Purpose of Disbursement FINANCE 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>B. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7527</b> Amount of Each Disbursement this Period 1000.00	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Category/ Type
Purpose of Disbursement FINANCE 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>C. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I7689</b> Amount of Each Disbursement this Period 1000.00	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Category/ Type
Purpose of Disbursement FINANCE 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4044.20
<b>TOTAL</b> 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7705</b> Amount of Each Disbursement this Period [ ] 1000.00	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Category/ Type [ ]
Purpose of Disbursement FINANCE 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>B. MIGHT AND MAIN, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2017	
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7862</b> Amount of Each Disbursement this Period [ ] 1000.00	
City BLOOMINGTON	State IN	Zip Code 47401-6054	Category/ Type [ ]
Purpose of Disbursement FINANCE 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>C. O'DONNELL AND ASSOCIATES, LTD.</b>		Date of Disbursement MM / DD / YYYY 07 / 05 / 2017	
Mailing Address 829 EMERALD DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7388</b> Amount of Each Disbursement this Period [ ] 2500.00	
City ALEXANDRIA	State VA	Zip Code 22308	Category/ Type [ ]
Purpose of Disbursement COMMUNICATIONS 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)..... ▶

4500.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I7500  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I7524  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I7691  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 02 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.I7708**  
 Amount of Each Disbursement this Period  
 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 08 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.I7865**  
 Amount of Each Disbursement this Period  
 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOCKO STRATEGIES, LLC**

Mailing Address 2438 TUNLAW ROAD NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 18 / 2017

FEC Identification Number

C  
**Transaction ID : SB21B.I7493**  
 Amount of Each Disbursement this Period  
 2500.00

Memo Item

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

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

7500.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 04 / 2017
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C <b>Transaction ID : SB21B.I7501</b> Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	
Zip Code 20007		Memo Item <input type="checkbox"/>
Purpose of Disbursement FINANCE CONSULTING	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 06 / 2017
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C <b>Transaction ID : SB21B.I7525</b> Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	
Zip Code 20007		Memo Item <input type="checkbox"/>
Purpose of Disbursement FINANCE CONSULTING	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SOCKO STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017
Mailing Address 2438 TUNLAW ROAD NW		FEC Identification Number C <b>Transaction ID : SB21B.I7692</b> Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	
Zip Code 20007		Memo Item <input type="checkbox"/>
Purpose of Disbursement FINANCE CONSULTING	Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. SOCKO STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2438 TUNLAW ROAD NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7721

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. SOCKO STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 2438 TUNLAW ROAD NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 22 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7877

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. SOUTHWEST AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7507

Amount of Each Disbursement this Period: 15.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5015.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. SOUTHWEST AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7508

Amount of Each Disbursement this Period: 15.00

Memo Item

**B. SOUTHWEST AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7509

Amount of Each Disbursement this Period: 145.98

Memo Item

**C. SOUTHWEST AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address 2702 LOVE FIELD DRIVE

City DALLAS State TX Zip Code 75235-1908

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 03 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7510

Amount of Each Disbursement this Period: 244.98

Memo Item

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

405.96

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. THE ALEXANDER HOTEL**

Full Name (Last, First, Middle Initial)

Mailing Address 333 S DELAWARE ST

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7737

Amount of Each Disbursement this Period: 1583.54

Memo Item

**B. UMI GRILL**

Full Name (Last, First, Middle Initial)

Mailing Address 2002 S 3RD ST

City TERRE HAUTE State IN Zip Code 47802

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7703

Amount of Each Disbursement this Period: 1086.53

Memo Item

**C. UNITED AIRLINES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7506

Amount of Each Disbursement this Period: 224.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2894.87

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES, INC.</b>		Date of Disbursement MM / DD / YYYY 08 / 18 / 2017
Mailing Address 8909 PURDUE ROAD, SUITE 400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7516</b> Amount of Each Disbursement this Period [ ] 173.20
City INDIANAPOLIS	State IN	Zip Code 46268-3149
Purpose of Disbursement TRAVEL	Category/Type [ ]	
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>B. UNITED AIRLINES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2017
Mailing Address 8909 PURDUE ROAD, SUITE 400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7697</b> Amount of Each Disbursement this Period [ ] 563.80
City INDIANAPOLIS	State IN	Zip Code 46268-3149
Purpose of Disbursement TRAVEL	Category/Type [ ]	
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>C. UNITED AIRLINES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 19 / 2017
Mailing Address 8909 PURDUE ROAD, SUITE 400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I7700</b> Amount of Each Disbursement this Period [ ] 368.40
City INDIANAPOLIS	State IN	Zip Code 46268-3149
Purpose of Disbursement TRAVEL	Category/Type [ ]	
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)..... ▶

1105.40

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. UNITED AIRLINES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I7702

Amount of Each Disbursement this Period: 416.20

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:

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	416.20
<b>TOTAL</b> This Period (last page this line number only).....▶	114387.65

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ANDY BARR FOR CONGRESS, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2059

City LEXINGTON State KY Zip Code 40588-2059

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name BARR, GARLAND, ANDY, , IV

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: KY District: 06

Date of Disbursement: 08 / 22 / 2017

FEC Identification Number: C00467571  
Transaction ID : SB23.I7519  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. CITIZENS FOR JOSH MANDEL INC**

Full Name (Last, First, Middle Initial)  
Mailing Address 24780 PENSHURST DRIVE

City BEACHWOOD State OH Zip Code 44122

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name MANDEL, JOSH, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: OH District:

Date of Disbursement: 12 / 08 / 2017

FEC Identification Number: C00494930  
Transaction ID : SB23.I7866  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. FRIENDS OF TODD YOUNG, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1053

City BLOOMINGTON State IN Zip Code 47402

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name YOUNG, TODD, CHRISTOPHER, ,

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼

State: IN District:

Date of Disbursement: 12 / 22 / 2017

FEC Identification Number: C00459255  
Transaction ID : SB23.I7876  
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)..... ▶

12500.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. HELLER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 09 / 30 / 2017
Mailing Address PO BOX 371907		FEC Identification Number C 000494229 <b>Transaction ID : SB23.I7541</b> Amount of Each Disbursement this Period 5000.00
City LAS VEGAS	State NV	Zip Code 89137
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name <b>HELLER, DEAN, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. JEFF FLAKE FOR US SENATE INC</b>		Date of Disbursement MM / DD / YYYY 08 / 22 / 2017
Mailing Address PO BOX 12512		FEC Identification Number C 000347260 <b>Transaction ID : SB23.I7521</b> Amount of Each Disbursement this Period 5000.00
City TEMPE	State AZ	Zip Code 85284
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name <b>FLAKE, JEFF, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. MCCONNELL SENATE COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2017
Mailing Address 2318 DUNDEE ROAD		FEC Identification Number C 000193342 <b>Transaction ID : SB23.I7711</b> Amount of Each Disbursement this Period 5000.00
City LOUISVILLE	State KY	Zip Code 40205
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type
Candidate Name <b>MCCONNELL, MITCH, , ,</b>		
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) ▼	
State: KY	District:	<input type="checkbox"/> 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 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. MCCONNELL SENATE COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 11 / 06 / 2017
Mailing Address 2318 DUNDEE ROAD		FEC Identification Number C 000193342 <b>Transaction ID : SB23.I7714</b> Amount of Each Disbursement this Period 2500.00
City LOUISVILLE	State KY	Zip Code 40205
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name <b>MCCONNELL, MITCH, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" 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: KY	District:	

Full Name (Last, First, Middle Initial) <b>B. MCCONNELL SENATE COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 11 / 10 / 2017
Mailing Address 2318 DUNDEE ROAD		FEC Identification Number C 000193342 <b>Transaction ID : SB23.I7739</b> Amount of Each Disbursement this Period 1583.54
City LOUISVILLE	State KY	Zip Code 40205
Purpose of Disbursement INKIND: CATERING/PARKING		Category/Type
Candidate Name <b>MCCONNELL, MITCH, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" 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 checked="" type="checkbox"/> Memo Item
State: KY	District:	

Full Name (Last, First, Middle Initial) <b>C. STRANGE FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 07 / 11 / 2017
Mailing Address PO BOX 3670		FEC Identification Number C 000629451 <b>Transaction ID : SB23.I7483</b> Amount of Each Disbursement this Period 5000.00
City MONTGOMERY	State AL	Zip Code 35209
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name <b>STRANGE, LUTHER, J, , III</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2017 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ SPECIAL PRIMARY	<input type="checkbox"/> Memo Item
State: AL	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**

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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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. STRANGE FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3670

City MONTGOMERY State AL Zip Code 35209

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name STRANGE, LUTHER, J, , III

Office Sought:  House  Senate  President

Disbursement For: 2017  Primary  General  Other (specify) PRIMARY RUNOFF

State: AL District:

Date of Disbursement: 09 / 20 / 2017

FEC Identification Number: C00629451  
Transaction ID : SB23.I7535  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. WICKER FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 64

City JACKSON State MS Zip Code 39205

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name WICKER, ROGER, F, ,

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify)

State: MS District:

Date of Disbursement: 09 / 20 / 2017

FEC Identification Number: C00443218  
Transaction ID : SB23.I7534  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C.**

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

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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

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

10000.00
45000.00

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

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

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

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

**A. FRIENDS OF SUZANNE CROUCH**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2960

City INDIANAPOLIS State IN Zip Code 46206-2960

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement: 07 / 18 / 2017

FEC Identification Number: C  
Transaction ID : SB29.I7492  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. FRIENDS OF CONNIE LAWSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 133 W MARKET STREET # 196

City INDIANAPOLIS State IN Zip Code 46204-2801

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2017

FEC Identification Number: C  
Transaction ID : SB29.I7720  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. KELLY FOR INDIANA**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 3114

City INDIANAPOLIS State IN Zip Code 46206-3114

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 11 / 15 / 2017

FEC Identification Number: C  
Transaction ID : SB29.I7719  
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

3000.00

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

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

Full Name (Last, First, Middle Initial) <b>A. ERIC HOLCOMB FOR INDIANA</b>		Date of Disbursement MM / DD / YYYY 12 / 08 / 2017	
Mailing Address 101 W. OHIO ST., SUITE 2200		FEC Identification Number C [ ] <b>Transaction ID : SB29.I7867</b> Amount of Each Disbursement this Period 5000.00	
City INDIANAPOLIS	State IN	Zip Code 46204	Category/ Type [ ]
Purpose of Disbursement POLITICAL CONTRIBUTION		Candidate Name	
Office Sought: <input 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF TERA KLUTZ</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2017	
Mailing Address 101 W. OHIO STREET SUITE 2200		FEC Identification Number C [ ] <b>Transaction ID : SB29.I7722</b> Amount of Each Disbursement this Period 1000.00	
City INDIANAPOLIS	State IN	Zip Code 46204	Category/ Type [ ]
Purpose of Disbursement POLITICAL CONTRIBUTION		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" 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>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	9000.00