

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

New Day for America

ADDRESS (number and street) 4679 Winterset Drive

Check if different than previously reported. (ACC) Columbus OH 43220

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

C C00581868

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

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

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y

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

Signature of Treasurer Yuskewich, J., Matthew, , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

New Day for America

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="2018"/>		346480.79
(b) Cash on Hand at Beginning of Reporting Period.....	346480.79	
(c) Total Receipts (from Line 19)	26986.40	26986.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	373467.19	373467.19
7. Total Disbursements (from Line 31).....	91761.05	91761.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	281706.14	281706.14
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

New Day for America

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	25000.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	25000.00	25000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	1986.40	1986.40
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)).....▶	26986.40	26986.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	26986.40	26986.40

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	91761.05	91761.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	91761.05	91761.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	91761.05	91761.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	91761.05	91761.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	25000.00	25000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25000.00	25000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	91761.05	91761.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	91761.05	91761.05

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

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

FOR LINE NUMBER: PAGE 6 OF 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
New Day for America

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 POLITICAL EDUCATION PATTERNS POLITICAL ARM INTL UNION OPERATING ENG LOCAL 18

Mailing Address 3515 PROSPECT AVENUE

City CLEVELAND	State OH	Zip Code 44115
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FEC ID number of contributing federal political committee. **C** C00065870

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2018

Transaction ID : SA11C.8513

Amount of Each Receipt this Period
 25000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	25000.00
TOTAL This Period (last page this line number only).....	25000.00

**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 25
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
New Day for America

A. EDonation 5 Account

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

Mailing Address 117 North Saint Asaph Street

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

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 ▼
243.90

Date of Receipt: **01 / 25 / 2018**
Transaction ID : SA17.8511

Amount of Each Receipt this Period: 243.90

Memo Item

B. EDonation 5 Account

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

Mailing Address 117 North Saint Asaph Street

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

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 ▼
1898.90

Date of Receipt: **02 / 13 / 2018**
Transaction ID : SA17.8515

Amount of Each Receipt this Period: 1655.00

Memo Item

C. EDonation 5 Account

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

Mailing Address 117 North Saint Asaph Street

City Alexandria	State VA	Zip Code 22314
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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 ▼
1986.40

Date of Receipt: **03 / 12 / 2018**
Transaction ID : SA17.8516

Amount of Each Receipt this Period: 87.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1986.40
TOTAL This Period (last page this line number only).....	1986.40

**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)
New Day for America

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address PO Box 299051		FEC Identification Number C [] Transaction ID : SB21B.8492 Amount of Each Disbursement this Period [] 844.61
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		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. The Top Steakhouse		Date of Disbursement MM / DD / YYYY 01 / 05 / 2018
Mailing Address 2891 East Main Street		FEC Identification Number C [] Transaction ID : SB21B.8492.c Amount of Each Disbursement this Period [] 633.26
City Columbus	State OH	Zip Code 43209
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address PO Box 299051		FEC Identification Number C [] Transaction ID : SB21B.8497 Amount of Each Disbursement this Period [] 3695.25
City Ft. Lauderdale	State FL	Zip Code 33329
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4539.86
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)
New Day for America

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement MM / DD / YYYY 01 / 23 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8497.1 Amount of Each Disbursement this Period [] 616.60
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 01 / 23 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8497.1 Amount of Each Disbursement this Period [] 616.60
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement MM / DD / YYYY 01 / 27 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8497.1 Amount of Each Disbursement this Period [] 752.60
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. Ink48		Date of Disbursement MM / DD / YYYY 01 / 27 / 2018
Mailing Address 653 11th Avenue		FEC Identification Number C Transaction ID : SB21B.8497.: Amount of Each Disbursement this Period 852.95
City New York	State NY	
Purpose of Disbursement LODGING EXPENSES		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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address 3875 Airways Blvd		FEC Identification Number C Transaction ID : SB21B.8497.8 Amount of Each Disbursement this Period 350.35
City Memphis	State TN	
Purpose of Disbursement SHIPPING		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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address PO Box 299051		FEC Identification Number C Transaction ID : SB21B.8509 Amount of Each Disbursement this Period 10487.24
City Ft. Lauderdale	State FL	
Purpose of Disbursement CREDIT CARD PAYMENT		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) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	10487.24
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)
New Day for America

Full Name (Last, First, Middle Initial)
A. DEL FRISCOS DOUBLE EAGLE STEAKHOUSE

Date of Disbursement: MM / DD / YYYY
02 / 22 / 2018

Mailing Address: 950 I ST NW STE 501

City: WASHINGTON State: DC Zip Code: 20001

Purpose of Disbursement: FOOD AND BEVERAGES

Candidate Name: _____

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

State: District: _____

FEC Identification Number: C
Transaction ID : SB21B.8509.4
Amount of Each Disbursement this Period: 644.65

Memo Item

Full Name (Last, First, Middle Initial)
B. iContact

Date of Disbursement: MM / DD / YYYY
03 / 01 / 2018

Mailing Address: 2450 Perimeter Park Dr.

City: Morrisville State: NC Zip Code: 27560

Purpose of Disbursement: MARKETING

Candidate Name: _____

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

State: District: _____

FEC Identification Number: C
Transaction ID : SB21B.8509.5
Amount of Each Disbursement this Period: 79.00

Memo Item

Full Name (Last, First, Middle Initial)
C. American Airlines

Date of Disbursement: MM / DD / YYYY
03 / 07 / 2018

Mailing Address: 4330 Amon Carter Blvd

City: Forth Worth State: TX Zip Code: 76155

Purpose of Disbursement: PLANE TICKET

Candidate Name: _____

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

State: District: _____

FEC Identification Number: C
Transaction ID : SB21B.8509.
Amount of Each Disbursement this Period: 464.31

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C Transaction ID : SB21B.8509.; Amount of Each Disbursement this Period 376.30
City Forth Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C Transaction ID : SB21B.8509.8 Amount of Each Disbursement this Period 464.31
City Forth Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C Transaction ID : SB21B.8509. Amount of Each Disbursement this Period 376.30
City Forth Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C Transaction ID : SB21B.8509. Amount of Each Disbursement this Period 11.96
City Forth Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 4330 Amon Carter Blvd		FEC Identification Number C Transaction ID : SB21B.8509.1 Amount of Each Disbursement this Period 11.96
City Forth Worth	State TX	
Zip Code 76155	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018
Mailing Address 2 N. LaSalle Street		FEC Identification Number C Transaction ID : SB21B.8509. Amount of Each Disbursement this Period 647.00
City Chicago	State IL	
Zip Code 60602	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement MM / DD / YYYY 03 / 07 / 2018	
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [] Transaction ID : SB21B.8509. Amount of Each Disbursement this Period [] 647.00	
City Chicago	State IL	Zip Code 60602	Category/ Type []
Purpose of Disbursement PLANE TICKET		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 checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018	
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8509.1 Amount of Each Disbursement this Period [] 410.30	
City Columbus	State OH	Zip Code 43219	Category/ Type []
Purpose of Disbursement PLANE TICKET		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 checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. Delta Airlines		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018	
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8509. Amount of Each Disbursement this Period [] 381.30	
City Columbus	State OH	Zip Code 43219	Category/ Type []
Purpose of Disbursement PLANE TICKET		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 checked="" type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. Delta Airlines		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8509. Amount of Each Disbursement this Period [] 425.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C [] Transaction ID : SB21B.8509.1 Amount of Each Disbursement this Period [] 425.30
City Columbus	State OH	Zip Code 43219
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Ink48		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 653 11th Avenue		FEC Identification Number C [] Transaction ID : SB21B.8509. Amount of Each Disbursement this Period [] 2395.75
City New York	State NY	Zip Code 10036
Purpose of Disbursement LODGING EXPENSES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. Southwest Air		Date of Disbursement MM / DD / YYYY 02 / 28 / 2018	
Mailing Address PO Box 36647-1CR		FEC Identification Number C [REDACTED]	
City Dallas	State TX	Zip Code 75235	Transaction ID : SB21B.8509.
Purpose of Disbursement PLANE TICKET		Category/ Type	Amount of Each Disbursement this Period 547.68
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Campagna Quattro		Date of Disbursement MM / DD / YYYY 03 / 12 / 2018	
Mailing Address 205 E 81st Street		FEC Identification Number C [REDACTED]	
City New York	State NY	Zip Code 10028	Transaction ID : SB21B.8509.2
Purpose of Disbursement FOOD AND BEVERAGES		Category/ Type	Amount of Each Disbursement this Period 259.70
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Southwest Air		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018	
Mailing Address PO Box 36647-1CR		FEC Identification Number C [REDACTED]	
City Dallas	State TX	Zip Code 75235	Transaction ID : SB21B.8509.
Purpose of Disbursement PLANE TICKET		Category/ Type	Amount of Each Disbursement this Period 171.96
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

0.00
[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)
New Day for America

Full Name (Last, First, Middle Initial) A. Southwest Air		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address PO Box 36647-1CR		FEC Identification Number C [] Transaction ID : SB21B.8509.2 Amount of Each Disbursement this Period [] 60.00
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Southwest Air		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address PO Box 36647-1CR		FEC Identification Number C [] Transaction ID : SB21B.8509.2 Amount of Each Disbursement this Period [] 171.96
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 2 N. LaSalle Street		FEC Identification Number C [] Transaction ID : SB21B.8509. Amount of Each Disbursement this Period [] 482.00
City Chicago	State IL	Zip Code 60602
Purpose of Disbursement PLANE TICKET		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement MM / DD / YYYY 03 / 13 / 2018
Mailing Address 2 N. LaSalle Street		FEC Identification Number C Transaction ID : SB21B.8509.2 Amount of Each Disbursement this Period 67.30
City Chicago	State IL	
Zip Code 60602	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Delta Airlines		Date of Disbursement MM / DD / YYYY 03 / 14 / 2018
Mailing Address 4600 International Gateway		FEC Identification Number C Transaction ID : SB21B.8509.2 Amount of Each Disbursement this Period 416.30
City Columbus	State OH	
Zip Code 43219	Purpose of Disbursement PLANE TICKET	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Baker Hostetler LLP		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address PO Box 70189		FEC Identification Number C Transaction ID : SB21B.8493 Amount of Each Disbursement this Period 442.50
City Cleveland	State OH	
Zip Code 44190	Purpose of Disbursement LEGAL FEES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	442.50
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
New Day for America

Full Name (Last, First, Middle Initial)
A. GARCEA, JORDAN, , Mr.,

Mailing Address **41 S HIGH STREET**

City **COLUMBUS** State **OH** Zip Code **43215**

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
01 / 22 / 2018

FEC Identification Number

Transaction ID : SB21B.8484
Amount of Each Disbursement this Period
 2100.00

Memo Item

Full Name (Last, First, Middle Initial)
B. GARCEA, JORDAN, , Mr.,

Mailing Address **41 S HIGH STREET**

City **COLUMBUS** State **OH** Zip Code **43215**

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
02 / 15 / 2018

FEC Identification Number

Transaction ID : SB21B.8494
Amount of Each Disbursement this Period
 1050.00

Memo Item

Full Name (Last, First, Middle Initial)
C. Huntington National Bank

Mailing Address **PO Box 1558**

City **Columbus** State **OH** Zip Code **43216**

Purpose of Disbursement
WIRE FEE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /
03 / 15 / 2018

FEC Identification Number

Transaction ID : SB21B.8507
Amount of Each Disbursement this Period
 35.00

Memo Item

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

3185.00

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)
New Day for America

Full Name (Last, First, Middle Initial) A. KERSCHNER CONSULTING LTC		Date of Disbursement MM / DD / YYYY 01 / 11 / 2018
Mailing Address PO BOX 507		FEC Identification Number C [] Transaction ID : SB21B.8480 Amount of Each Disbursement this Period [] 1500.00
City TIFFIN	State OH	Zip Code 44883
Purpose of Disbursement FUNDRAISING 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. KERSCHNER CONSULTING LTC		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address PO BOX 507		FEC Identification Number C [] Transaction ID : SB21B.8490 Amount of Each Disbursement this Period [] 1500.00
City TIFFIN	State OH	Zip Code 44883
Purpose of Disbursement FUNDRAISING 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) C. KERSCHNER CONSULTING LTC		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018
Mailing Address PO BOX 507		FEC Identification Number C [] Transaction ID : SB21B.8502 Amount of Each Disbursement this Period [] 1500.00
City TIFFIN	State OH	Zip Code 44883
Purpose of Disbursement FUNDRAISING 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	

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)
New Day for America

Full Name (Last, First, Middle Initial) A. Red Tack Strategies LLC		Date of Disbursement MM / DD / YYYY 01 / 11 / 2018
Mailing Address 113 S Ardmore		FEC Identification Number C [] Transaction ID : SB21B.8482 Amount of Each Disbursement this Period 5000.00
City Bexley	State OH	Zip Code 43209
Purpose of Disbursement MEDIA 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. Red Tack Strategies LLC		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 113 S Ardmore		FEC Identification Number C [] Transaction ID : SB21B.8495 Amount of Each Disbursement this Period 5000.00
City Bexley	State OH	Zip Code 43209
Purpose of Disbursement MEDIA 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) C. Red Tack Strategies LLC		Date of Disbursement MM / DD / YYYY 03 / 08 / 2018
Mailing Address 113 S Ardmore		FEC Identification Number C [] Transaction ID : SB21B.8503 Amount of Each Disbursement this Period 5000.00
City Bexley	State OH	Zip Code 43209
Purpose of Disbursement MEDIA 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	

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)
New Day for America

Full Name (Last, First, Middle Initial) A. Right Digital LLC			Date of Disbursement MM / DD / YYYY 01 / 11 / 2018	
Mailing Address 408 E. Scheyer Place				
City Columbus	State OH	Zip Code 43214	FEC Identification Number C [] Transaction ID : SB21B.8481 Amount of Each Disbursement this Period [] 2250.00 <input type="checkbox"/> Memo Item	
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:				
Full Name (Last, First, Middle Initial) B. Right Digital LLC			Date of Disbursement MM / DD / YYYY 01 / 22 / 2018	
Mailing Address 408 E. Scheyer Place				
City Columbus	State OH	Zip Code 43214	FEC Identification Number C [] Transaction ID : SB21B.8486 Amount of Each Disbursement this Period [] 3000.00 <input type="checkbox"/> Memo Item	
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:				
Full Name (Last, First, Middle Initial) C. Right Digital LLC			Date of Disbursement MM / DD / YYYY 02 / 09 / 2018	
Mailing Address 408 E. Scheyer Place				
City Columbus	State OH	Zip Code 43214	FEC Identification Number C [] Transaction ID : SB21B.8491 Amount of Each Disbursement this Period [] 2250.00 <input type="checkbox"/> Memo Item	
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:				
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)
New Day for America

A. Right Digital LLC

Full Name (Last, First, Middle Initial)

Mailing Address 408 E. Scheyer Place

City Columbus State OH Zip Code 43214

Purpose of Disbursement DIGITAL CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB21B.8504

Amount of Each Disbursement this Period: 2250.00

Memo Item

B. The Network Companies LLC

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CAMPAIGN CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.8487

Amount of Each Disbursement this Period: 10000.00

Memo Item

C. The Network Companies LLC

Full Name (Last, First, Middle Initial)

Mailing Address 7062 Comanche Trail

City Austin State TX Zip Code 78732

Purpose of Disbursement CAMPAIGN CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2018

FEC Identification Number: C

Transaction ID : SB21B.8499

Amount of Each Disbursement this Period: 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 22250.00

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)
New Day for America

A. The Network Companies LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 7062 Comanche Trail

M M M	/	D D D	/	Y Y Y Y Y
03		26		2018

City Austin State TX Zip Code 78732

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONSULTING

C

Candidate Name

Transaction ID : SB21B.8510

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

10000.00

Memo Item

B. WINNING DYNAMIC LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 6012

M M M	/	D D D	/	Y Y Y Y Y
03		12		2018

City COLUMBUS State OH Zip Code 43206

FEC Identification Number

Purpose of Disbursement
CAMPAIGN CONSULTING

C

Transaction ID : SB21B.8505

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

11250.00

Memo Item

C. Winterset CPA Group

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 4679 Winterset Drive

M M M	/	D D D	/	Y Y Y Y Y
01		22		2018

City Columbus State OH Zip Code 43220

FEC Identification Number

Purpose of Disbursement
ACCOUNTING

C

Transaction ID : SB21B.8485

Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

368.75

Memo Item

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

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

21618.75

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**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)
New Day for America

Full Name (Last, First, Middle Initial) A. Winterset CPA Group		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [] Transaction ID : SB21B.8498 Amount of Each Disbursement this Period [] 1585.00	
City Columbus	State OH	Zip Code 43220	Category/ Type []
Purpose of Disbursement ACCOUNTING FEES		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. Winterset CPA Group		Date of Disbursement MM / DD / YYYY 03 / 22 / 2018	
Mailing Address 4679 Winterset Drive		FEC Identification Number C [] Transaction ID : SB21B.8508 Amount of Each Disbursement this Period [] 425.00	
City Columbus	State OH	Zip Code 43220	Category/ Type []
Purpose of Disbursement ACCOUNTING FEES		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C.		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:			

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

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

2010.00
91533.35