

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**
WINNOVEMBER POLITICAL ACTION COMMITTEE

ADDRESS (number and street) **617 EAST CUSTIS AVENUE**
Check if different than previously reported. (ACC) **ALEXANDRIA VA 22301**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00516013 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2019 through / / 2019

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

Signature of Treasurer BARTON, STACY, , , [Electronically Filed] Date / / 2019

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

WINNOVEMBER 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="2019"/>		<input type="text" value="12050.04"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10392.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10000.00"/>	<input type="text" value="22500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20392.18"/>	<input type="text" value="34550.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9558.28"/>	<input type="text" value="23716.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10833.90"/>	<input type="text" value="10833.90"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

WINNOVEMBER 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).....	3300.00	3300.00
(ii) Unitemized	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3500.00	3500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6500.00	19000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	22500.00
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.).....	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)).....▶	10000.00	22500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10000.00	22500.00

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	1558.28	5716.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1558.28	5716.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8000.00	18000.00
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)) ..	9558.28	23716.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9558.28	23716.14

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10000.00	22500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	22500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1558.28	5716.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1558.28	5716.14

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

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

NAME OF COMMITTEE (In Full)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. CHAOWL, NABIL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5309 ANCHOR COURT

City FAIRFAX	State VA	Zip Code 22032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CROPP-METCALFE	Occupation (for Individual) HVAC EXECUTIVE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2019

Transaction ID : SA11AI.4583

Amount of Each Receipt this Period
550.00

Memo Item
CONTRIBUTION

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

Mailing Address 4835 CORDELL AVENUE, APT 504

City BETHESDA	State MD	Zip Code 20814
------------------	-------------	-------------------

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

Name of Employer (for Individual) BOOZ ALLEN	Occupation (for Individual) LEAD ASSOCIATE
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2019

Transaction ID : SA11AI.4590

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 12605 CLARK MEADOWS COURT

City CLARKSBURG	State MD	Zip Code 20871
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2019

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. SAYFIE, JUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3122 NE 211TH STREET
 City AVENTURA State FL Zip Code 33180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BALLARD PARTNERS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 25 / 2019
Transaction ID : SA11AI.4582
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. ZAKARIA, HADI, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6438 COLUMBIA PIKE
 City ANNANDALE State VA Zip Code 22003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SERVICE STATION OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2019
Transaction ID : SA11AI.4584
 Amount of Each Receipt this Period 250.00
 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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	3300.00

**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 8 OF 13
<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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. CARDINAL HEALTH INC. PAC AKA CARDINAL HEALTH COMPANIES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7000 CARDINAL PLACE

City DUBLIN	State OH	Zip Code 43017
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FEC ID number of contributing federal political committee. **C** C00332833

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
07		01		2019

Transaction ID : SA11C.4576

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON	State DC	Zip Code 20001
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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
07		01		2019

Transaction ID : SA11C.4572

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. KAYLA'S LIST PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1032 15TH ST. NW
#128

City WASHINGTON	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00664706

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2019

Transaction ID : SA11C.4589

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 13
<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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TURKISH COALITION NORTHEAST POLITICAL ACTION COMMITTEE (TC-NE PAC)

Mailing Address 1200 ROUTE 22 EAST

City BRIDGEWATER	State NJ	Zip Code 08807
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FEC ID number of contributing federal political committee. **C** C00487181

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

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2019

Transaction ID : SA11C.4586

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address

City	State	Zip Code
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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 M	/	D D D	/	Y Y Y Y Y Y
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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
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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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	6500.00

**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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. ROCK CONSULTING LLC		Date of Disbursement MM / DD / YYYY 08 / 05 / 2019
Mailing Address 5382 MEADOWBROOK ROAD		FEC Identification Number C [] Transaction ID : SB21B.4571 Amount of Each Disbursement this Period [] 187.50
City BIRMINGHAM	State AL	Zip Code 35242
Purpose of Disbursement BOOKKEEPING / COMPLIANCE		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 M GROUP		Date of Disbursement MM / DD / YYYY 07 / 03 / 2019
Mailing Address 617 EAST CUSTIS AVENUE		FEC Identification Number C [] Transaction ID : SB21B.4570 Amount of Each Disbursement this Period [] 1370.78
City ALEXANDRIA	State VA	Zip Code 22301
Purpose of Disbursement FUNDRAISING CONSULTING SVCS.		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.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		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).....▶	1558.28
TOTAL This Period (last page this line number only).....▶	1558.28

**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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. ALASKANS FOR DON YOUNG		Date of Disbursement MM / DD / YYYY 09 / 26 / 2019
Mailing Address 2504 FAIRBANKS ST		FEC Identification Number C C00012229 Transaction ID : SB23.4563
City ANCHORAGE	State AK	Zip Code 99503
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name YOUNG, DONALD E, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AK	District: 00	

Full Name (Last, First, Middle Initial) B. ANDY BARR FOR CONGRESS, INC.		Date of Disbursement MM / DD / YYYY 09 / 26 / 2019
Mailing Address PO BOX 2059		FEC Identification Number C C00467571 Transaction ID : SB23.4564
City LEXINGTON	State KY	Zip Code 40588
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name BARR, GARLAND ANDY, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: KY	District: 06	

Full Name (Last, First, Middle Initial) C. BISHOP FOR CONGRESS		Date of Disbursement MM / DD / YYYY 08 / 26 / 2019
Mailing Address 2216 WHILDEN COURT		FEC Identification Number C C00699660 Transaction ID : SB23.4562
City CHARLOTTE	State NC	Zip Code 28211
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 1000.00
Candidate Name BISHOP, JAMES, DANIEL, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	<input type="checkbox"/> Memo Item
State: NC	District: 09	

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

3000.00

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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. COMMITTEE TO ELECT STEVE WATKINS

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT STEVE WATKINS

Date of Disbursement: 09 / 26 / 2019

Mailing Address: 6021 SW 29TH STREET, SUITE A, BOX 150

City: TOPEKA, State: KS, Zip Code: 66614

Purpose of Disbursement: CONTRIBUTION

Candidate Name: WATKINS, STEVEN, , ,

Office Sought: House, Senate, President

Disbursement For: 2020, Primary, General, Other (specify) ▼

State: KS, District: 02

FEC Identification Number: C00660050
Transaction ID : SB23.4565
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. FRIENDS OF DENVER RIGGLEMAN, INC.

Full Name (Last, First, Middle Initial)
FRIENDS OF DENVER RIGGLEMAN, INC.

Date of Disbursement: 09 / 26 / 2019

Mailing Address: P.O. BOX 798

City: NELLYSFORD, State: VA, Zip Code: 22958

Purpose of Disbursement: CONTRIBUTION

Candidate Name: RIGGLEMAN, DENVER, LEE, , III

Office Sought: House, Senate, President

Disbursement For: 2020, Primary, General, Other (specify) ▼

State: VA, District: 05

FEC Identification Number: C00680488
Transaction ID : SB23.4566
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. FRIENDS OF HAGEDORN

Full Name (Last, First, Middle Initial)
FRIENDS OF HAGEDORN

Date of Disbursement: 09 / 26 / 2019

Mailing Address: 11 CIVIC CENTER PLZ STE 007

City: MANKATO, State: MN, Zip Code: 56001

Purpose of Disbursement: CONTRIBUTION

Candidate Name: HAGEDORN, JAMES, , ,

Office Sought: House, Senate, President

Disbursement For: 2020, Primary, General, Other (specify) ▼

State: MN, District: 01

FEC Identification Number: C00550707
Transaction ID : SB23.4567
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

3000.00

**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)
WINNOVEMBER POLITICAL ACTION COMMITTEE

A. MAST FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3016

City: STUART State: FL Zip Code: 34995

Purpose of Disbursement: CONTRIBUTION

Candidate Name: **MAST, BRIAN, , ,**

Office Sought: House Senate President
State: FL District: 18

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: **C00632257**
Transaction ID : **SB23.4568**
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. RODNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 344

City: TAYLORVILLE State: IL Zip Code: 62568

Purpose of Disbursement: CONTRIBUTION

Candidate Name: **DAVIS, RODNEY, L, ,**

Office Sought: House Senate President
State: IL District: 13

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 09 / 26 / 2019

FEC Identification Number: **C00521948**
Transaction ID : **SB23.4569**
Amount of Each Disbursement this Period: 1000.00

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
State District

Disbursement For:
 Primary General Other (specify) ▼

Date of Disbursement

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	8000.00