

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Reclaim America PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2017"/>		176026.30
(b) Cash on Hand at Beginning of Reporting Period.....	176026.30	
(c) Total Receipts (from Line 19)	120945.40	120945.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	296971.70	296971.70
7. Total Disbursements (from Line 31).....	86023.35	86023.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	210948.35	210948.35
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

Write or Type Committee Name
Reclaim America PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	345.00	345.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	345.00	345.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	83000.00	83000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	83345.00	83345.00
12. Transfers From Affiliated/Other Party Committees.....	37600.40	37600.40
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)).....▶	120945.40	120945.40
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	120945.40	120945.40

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	75023.35	75023.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	75023.35	75023.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	11000.00
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)) ..	86023.35	86023.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	86023.35	86023.35

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)	83345.00	83345.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	83345.00	83345.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	75023.35	75023.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	75023.35	75023.35

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 45
<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

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)
Reclaim America PAC

A. AKIN GUMP STRAUSS HAUER AND FELD LLP PAC

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

Mailing Address 1333 NEW HAMPSHIRE AVE NW

City WASHINGTON	State DC	Zip Code 20036-1500
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FEC ID number of contributing federal political committee. **C** C00104901

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
06	/	12	/	2017

Transaction ID : SA11C.1289166

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. AMAZON PAC

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

Mailing Address 601 NEW JERSEY AVENUE NW SUITE 900

City WASHINGTON	State DC	Zip Code 20001-2027
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FEC ID number of contributing federal political committee. **C** C00360354

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
05	/	16	/	2017

Transaction ID : SA11C.1289165

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. ASSOCIATION OF AMERICAN RAILROADS PAC

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

Mailing Address 425 3RD STREET SW
SUITE 1000

City WASHINGTON	State DC	Zip Code 20024-3228
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FEC ID number of contributing federal political committee. **C** C00280743

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA11C.1291063

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 45
<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)
Reclaim America PAC

A. BALCH & BINGHAM L.L.P. FEDERAL POLITICAL COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1901 6TH AVE N. SUITE 1500
 City BIRMINGHAM State AL Zip Code 35203-4642
 FEC ID number of contributing federal political committee. **C** C00358440
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 21 / 2017**
Transaction ID : SA11C.1285962
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. BNSF RAILPAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 961039
 City FORT WORTH State TX Zip Code 76161-0039
 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 **06 / 30 / 2017**
Transaction ID : SA11C.1291058
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

C. COMPASS BANCPAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 10566
 City BIRMINGHAM State AL Zip Code 35202-0566
 FEC ID number of contributing federal political committee. **C** C00142596
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **03 / 28 / 2017**
Transaction ID : SA11C.1285966
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 8 OF 45
<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)
Reclaim America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. CSX CORPORATION GOOD GOVERNMENT FUND			Date of Receipt
Mailing Address 1331 PENNSYLVANIA AVE NW SUITE 560			<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2017"/>
City WASHINGTON	State DC	Zip Code 20004-1745	Transaction ID : SA11C.1291059
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00163832"/>			Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC			Date of Receipt
Mailing Address 2980 FAIRVIEW PARK DRIVE			<input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City FALLS CHURCH	State VA	Zip Code 22042-4511	Transaction ID : SA11C.1285959
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00088591"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC			Date of Receipt
Mailing Address 2980 FAIRVIEW PARK DRIVE			<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2017"/>
City FALLS CHURCH	State VA	Zip Code 22042-4511	Transaction ID : SA11C.1285968
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00088591"/>			Amount of Each Receipt this Period <input type="text" value="2500.00"/>
Name of Employer (for Individual)		Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 45
<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)
Reclaim America PAC

A. FEDERATION OF AMERICAN HOSPITALS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 750 9TH STREET NW STE. 600
 City WASHINGTON State DC Zip Code 20001-4595
 FEC ID number of contributing federal political committee. **C** C00002261
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 03 / 21 / 2017
Transaction ID : SA11C.1285963
 Amount of Each Receipt this Period 4000.00
 Memo Item
CONTRIBUTION

B. GENERAL DYNAMICS CORPORATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2941 FAIRVIEW PARK DR. STE 100
 City FALLS CHURCH State VA Zip Code 22042-4541
 FEC ID number of contributing federal political committee. **C** C00078451
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 03 / 2017
Transaction ID : SA11C.1285864
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE (GEPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1299 PENNSYLVANIA AVE NW STE 900W
 City WASHINGTON State DC Zip Code 20004-2400
 FEC ID number of contributing federal political committee. **C** C00024869
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 16 / 2017
Transaction ID : SA11C.1291053
 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 10 OF 45
<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)
Reclaim America PAC

A. HCA GOOD GOVERNMENT FUND

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

Mailing Address ONE PARK PLAZA, P.O. BOX 550

City NASHVILLE	State TN	Zip Code 37202-0550
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FEC ID number of contributing federal political committee. **C** C00067231

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2017

Transaction ID : SA11C.1285960

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

B. HILTON WORLDWIDE PAC

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

Mailing Address 7930 JONES BRANCH DR.
STE 1100

City MCLEAN	State VA	Zip Code 22102-3313
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FEC ID number of contributing federal political committee. **C** C00213074

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
03	/	28	/	2017

Transaction ID : SA11C.1285967

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. LIFEPOINT HEALTH PAC

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

Mailing Address 330 SEVEN SPRINGS WAY
GOOD GOVERNMENT FUND

City BRENTWOOD	State TN	Zip Code 37027-5098
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FEC ID number of contributing federal political committee. **C** C00347955

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

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

Transaction ID : SA11C.1285865

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
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 11 OF 45
<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)
Reclaim America PAC

A. LOWE'S COMPANIES PAC (LOWPAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 LOWES BLVD
 City MOORESVILLE State NC Zip Code 28117-8520
 FEC ID number of contributing federal political committee. **C** C00251751
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 30 / 2017**
Transaction ID : SA11C.1291062
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 539 SOUTH MAIN STREET
 City FINDLAY State OH Zip Code 45840-3229
 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 ▼ 2500.00

Date of Receipt **06 / 26 / 2017**
Transaction ID : SA11C.1291055
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

C. NATIONAL ASSOCIATION OF BROADCASTERS PAC
 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 ▼ 2500.00

Date of Receipt **06 / 30 / 2017**
Transaction ID : SA11C.1291056
 Amount of Each Receipt this Period 2500.00
 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 12 OF 45
<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)
Reclaim America PAC

A. NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMI

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

Mailing Address 1101 KING ST
STE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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
04 / 12 / 2017

Transaction ID : SA11C.1287284

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. NEXTERA ENERGY, INC. PAC

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

Mailing Address 700 UNIVERSE BLVD.

City JUNO BEACH State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

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
03 / 24 / 2017

Transaction ID : SA11C.1285965

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NORFOLK SOUTHERN CORP. GOOD GOVERNMENT FUND

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

Mailing Address 3 COMMERCIAL PLACE

City NORFOLK State VA Zip Code 23510-2108

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2017

Transaction ID : SA11C.1291054

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 13 OF 45
<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)
Reclaim America PAC

A. OFFICE OF THE COMMISSIONER OF MAJOR LEAGUE BASEBALL POLITICA

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

Mailing Address 1201 15TH STREET N.W. STE. 320

City WASHINGTON	State DC	Zip Code 20005-2899
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FEC ID number of contributing federal political committee. **C** C00368142

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
03	/	31	/	2017

Transaction ID : SA11C.1287280

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. ORBITAL ATK INC. PAC

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

Mailing Address 1300 WILSON BLVD STE 400

City ARLINGTON	State VA	Zip Code 22209-2330
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00250209

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
03	/	31	/	2017

Transaction ID : SA11C.1287281

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. PINNACLE WEST PAC

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

Mailing Address 400 N. 5TH STREET

City PHOENIX	State AZ	Zip Code 85004-3902
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00015933

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
03	/	15	/	2017

Transaction ID : SA11C.1285961

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 45
<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)
Reclaim America PAC

A. PINNACLE WEST PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 400 N. 5TH STREET

City PHOENIX	State AZ	Zip Code 85004-3902
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00015933

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
06 / 30 / 2017
Transaction ID : SA11C.1291061

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. SENIORS HOUSING PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 5225 WISCONSIN AVE NW SUITE 502

City WASHINGTON	State DC	Zip Code 20015-2034
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00325332

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
03 / 21 / 2017
Transaction ID : SA11C.1285964

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. TENET HEALTHCARE CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1445 ROSS AVENUE STE. 1400

City DALLAS	State TX	Zip Code 75202-2703
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00119354

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 28 / 2017
Transaction ID : SA11C.1285969

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 45
<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)
Reclaim America PAC

A. TRUCKING PAC OF THE AMERICAN TRUCKING

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

Mailing Address 430 FIRST STREET S.E.
SUITE 100

City WASHINGTON State DC Zip Code 20003-1826

FEC ID number of contributing federal political committee. **C** C00002881

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2017

Transaction ID : SA11C.1287282

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. U.S. TRAVEL ASSOCIATION PAC

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

Mailing Address 1100 NEW YORK AVENUE NW
SUITE 450W

City WASHINGTON State DC Zip Code 20005-3934

FEC ID number of contributing federal political committee. **C** C00457754

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
05 / 16 / 2017

Transaction ID : SA11C.1289164

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. UNION PACIFIC FUND FOR EFFECTIVE GOVERNMENT

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

Mailing Address 700 13TH STREET NW SUITE 350

City WASHINGTON State DC Zip Code 20005-6621

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2017

Transaction ID : SA11C.1291057

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 45
<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)
Reclaim America PAC

A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

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

Mailing Address 702 SW 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-6209
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

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
06		30		2017

Transaction ID : SA11C.1291060

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

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

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	83000.00

**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 17 OF 45
<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)
Reclaim America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. RUBIO VICTORY COMMITTEE

Mailing Address **228 S WASHINGTON ST
STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00494617**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37600.40

Date of Receipt
03 / 31 / 2017

Transaction ID : SA12.1287283

Amount of Each Receipt this Period
9440.04

Memo Item
DISTRIBUTION OF NET JFC PROCEEDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. LEE, CYNTHIA, R., MRS.,

Mailing Address **13 SUNRISE CAY DRIVE**

City **KEY LARGO** State **FL** Zip Code **33037-5301**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 23 / 2017

Transaction ID : SA.1287207.1.0317

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. LEE, PATRICK, P., MR.,

Mailing Address **13 SUNRISE CAY DRIVE**

City **KEY LARGO** State **FL** Zip Code **33037-5301**

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
03 / 23 / 2017

Transaction ID : SA.1287208.1.0317

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	9440.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 45
<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)
Reclaim America PAC

A. MORALES-ROCA, MABEL, , MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3-7 CALLE TOLEDO

City GUAYNABO	State PR	Zip Code 00966-3103
------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2017

Transaction ID : SA.1282409.1.0317

Amount of Each Receipt this Period
3900.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

B. YBARRA, ELIAS, BEHAR, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address J3 IBERIA STE

City SAN JUAN	State PR	Zip Code 00920
------------------	-------------	-------------------

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

Name of Employer (for Individual) BEHAR-YBARRA & ASSOCIATES	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	10	/	2017

Transaction ID : SA.1282408.1.0317

Amount of Each Receipt this Period
3900.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

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

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
37600.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2017

Transaction ID : SA12.1291064

Amount of Each Receipt this Period
12866.42

Memo Item
DISTRIBUTION OF NET JFC PROCEEDS

SUBTOTAL of Receipts This Page (optional).....	12866.42
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 45
<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)
Reclaim America PAC

A. BALLARD, BRIAN, D., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 EAST PARK AVENUE

City TALLAHASSEE	State FL	Zip Code 32301-1515
---------------------	-------------	------------------------

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

Name of Employer (for Individual) SMITH & BALLARD	Occupation (for Individual) LOBBYIST
--	---

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
04	/	12	/	2017

Transaction ID : SA.1287326.1.0417

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

B. BALLARD, KATHRYN, SMITH, MRS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7445 HEARTLAND CIRCLE

City TALLAHASSEE	State FL	Zip Code 32312-7518
---------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : SA.1287325.1.0417

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

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

Mailing Address 5345 HAMMOCK DR

City CORAL GABLES	State FL	Zip Code 33156-2103
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	12	/	2017

Transaction ID : SA.1288383.1.0417

Amount of Each Receipt this Period
4400.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 45
<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)
Reclaim America PAC

A. KADRE, MANUEL, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5345 HAMMOCK DRIVE

City CORAL GABLES	State FL	Zip Code 33156-2103
----------------------	-------------	------------------------

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

Name of Employer (for Individual) MBB AUTO LLC	Occupation (for Individual) C.E.O.
---	---------------------------------------

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
04	/	12	/	2017

Transaction ID : SA.1288384.1.0417

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

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

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37600.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA12.1291065

Amount of Each Receipt this Period
5950.51

Memo Item
DISTRIBUTION OF NET JFC PROCEEDS

C. FANJUL, EMILIA, M., MS.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 JUNGLE RD.

City PALM BEACH	State FL	Zip Code 33480-4809
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2017

Transaction ID : SA.1288422.1.0517

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....▶	5950.51
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 45
<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)
Reclaim America PAC

A. FANJUL, J., PEPE, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 NORTH CLEMATIS STREET

City WEST PALM BEACH	State FL	Zip Code 33401-5550
-------------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2017

Transaction ID : SA.1288424.1.0517

Amount of Each Receipt this Period
4400.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

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

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
37600.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2017

Transaction ID : SA12.1291066

Amount of Each Receipt this Period
9343.43

Memo Item
DISTRIBUTION OF NET JFC PROCEEDS

C. DEMETREE, JAY, C., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6671 EPPING FOREST WAY N

City JACKSONVILLE	State FL	Zip Code 32217-2696
----------------------	-------------	------------------------

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

Name of Employer (for Individual) DEMETREE BROTHERS INC	Occupation (for Individual) 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
06	/	30	/	2017

Transaction ID : SA.1289364.1.0630

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER MEMO

TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	9343.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 45
<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)
Reclaim America PAC

A. ROOD, JOHN, D., AMB.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3030 HARTLEY ROAD, ST 310
SUITE 300

City JACKSONVILLE State FL Zip Code 32257-8211

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

Name of Employer (for Individual) VESTCOR Occupation (for Individual) REAL ESTATE

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 4600.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA.1289362.1.0630

Amount of Each Receipt this Period 4600.00

Memo Item
TRANSFER MEMO
TRANSFER FROM RUBIO VICTORY

B. THE GEO GROUP, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 621 NW 53RD STREET
ONE PARK PLACE, SUITE 700

City BOCA RATON State FL Zip Code 33487-8235

FEC ID number of contributing federal political committee. **C** C00382150

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

Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 06 / 30 / 2017
Transaction ID : SA.1289363.1.0630

Amount of Each Receipt this Period 5000.00

Memo Item
TRANSFER MEMO
TRANSFER FROM RUBIO VICTORY

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).....	0.00
TOTAL This Period (last page this line number only).....	37600.40

**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)
Reclaim America PAC

A. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I30071

Amount of Each Disbursement this Period: 2313.75

Memo Item

B. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement TRAVEL-SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I30077

Amount of Each Disbursement this Period: 3761.42

Memo Item

C. DELTA AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354-1989

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3013

Amount of Each Disbursement this Period: 2559.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6075.17

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)
Reclaim America PAC

A. HILTON-DC

Full Name (Last, First, Middle Initial)

Mailing Address 1016 16TH ST., NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3013

Amount of Each Disbursement this Period: 1033.23

Memo Item

B. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3007

Amount of Each Disbursement this Period: 2313.75

Memo Item

C. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3007

Amount of Each Disbursement this Period: 2313.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4627.50

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)
Reclaim America PAC

A. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 21 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3008

Amount of Each Disbursement this Period: 2313.75

Memo Item

B. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3008

Amount of Each Disbursement this Period: 2313.75

Memo Item

C. REED, CLINT, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2223 E. LONGHILLS

City BENTON State AR Zip Code 72019

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3008

Amount of Each Disbursement this Period: 2313.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6941.25

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. REID, TODD, , ,		Date of Disbursement MM / DD / YYYY 01 / 20 / 2017
Mailing Address 4462 TWINVIEW LANE		FEC Identification Number C Transaction ID : SB21B.I3010: Amount of Each Disbursement this Period 2246.00
City ORLANDO	State FL	
Zip Code 32814	Purpose of Disbursement STRATEGIC CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. REID, TODD, , ,		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017
Mailing Address 4462 TWINVIEW LANE		FEC Identification Number C Transaction ID : SB21B.I3010: Amount of Each Disbursement this Period 2246.00
City ORLANDO	State FL	
Zip Code 32814	Purpose of Disbursement STRATEGIC CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. REID, TODD, , ,		Date of Disbursement MM / DD / YYYY 03 / 11 / 2017
Mailing Address 4462 TWINVIEW LANE		FEC Identification Number C Transaction ID : SB21B.I3010: Amount of Each Disbursement this Period 2246.00
City ORLANDO	State FL	
Zip Code 32814	Purpose of Disbursement STRATEGIC CONSULTING	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6738.00
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. ALBERTO MARTINEZ		Date of Disbursement MM / DD / YYYY 01 / 20 / 2017	
Mailing Address 1325 CHETWORTH CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I30051 Amount of Each Disbursement this Period 2246.00	
City ALEXANDRIA	State VA	Zip Code 22314-1311	Category/ Type
Purpose of Disbursement STRATEGIC CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. ALBERTO MARTINEZ		Date of Disbursement MM / DD / YYYY 02 / 06 / 2017	
Mailing Address 1325 CHETWORTH CT		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I30051 Amount of Each Disbursement this Period 2246.00	
City ALEXANDRIA	State VA	Zip Code 22314-1311	Category/ Type
Purpose of Disbursement STRATEGIC CONSULTING			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. BB&T		Date of Disbursement MM / DD / YYYY 01 / 17 / 2017	
Mailing Address 1909 K ST., NW		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3006 Amount of Each Disbursement this Period 50.90	
City WASHINGTON	State DC	Zip Code 20006-2720	Category/ Type
Purpose of Disbursement MERCHANT FEE			
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).....▶	4542.90
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)
Reclaim America PAC

A. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 1909 K ST., NW

City WASHINGTON State DC Zip Code 20006-2720

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 15 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I3006**

Amount of Each Disbursement this Period: 50.90

Memo Item

B. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 1909 K ST., NW

City WASHINGTON State DC Zip Code 20006-2720

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 15 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I3006**

Amount of Each Disbursement this Period: 50.90

Memo Item

C. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 1909 K ST., NW

City WASHINGTON State DC Zip Code 20006-2720

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 15 / 2017

FEC Identification Number: C

Transaction ID : **SB21B.I3007**

Amount of Each Disbursement this Period: 50.90

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 152.70

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)
Reclaim America PAC

A. BB&T

Full Name (Last, First, Middle Initial)

Mailing Address 1909 K ST., NW

City WASHINGTON State DC Zip Code 20006-2720

Purpose of Disbursement MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3007

Amount of Each Disbursement this Period: 56.90

Memo Item

B. BB&T FINANCIAL

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I30065

Amount of Each Disbursement this Period: 12834.33

Memo Item

C. 201 BAR

Full Name (Last, First, Middle Initial)

Mailing Address 201 MASSACHUSETTS AVE., NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3011

Amount of Each Disbursement this Period: 7865.00

Memo Item

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

12891.23

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. AMERICAN AIRLINES

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2017

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I3010
Amount of Each Disbursement this Period
251.40

Memo Item

Full Name (Last, First, Middle Initial)
B. CHARLIE PALMER STEAK

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2017

Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20001-2133

Purpose of Disbursement CATERING

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I3010
Amount of Each Disbursement this Period
1571.70

Memo Item

Full Name (Last, First, Middle Initial)
C. RESTAURANT ASSOCIATES

Date of Disbursement: MM / DD / YYYY
01 / 20 / 2017

Mailing Address 455 DIRKSEN OFFICE BUILDING

City WASHINGTON State DC Zip Code 20510

Purpose of Disbursement CATERING

Candidate Name

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

State: District:

FEC Identification Number
C
Transaction ID : SB21B.I3010
Amount of Each Disbursement this Period
2857.50

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. BB&T FINANCIAL		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017	
Mailing Address P.O. BOX 580340		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3006I Amount of Each Disbursement this Period [REDACTED] 2631.17	
City CHARLOTTE	State NC	Zip Code 28258	Category/ Type [REDACTED]
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS		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. AVIS RENT-A-CAR		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017	
Mailing Address 6 SYLVAN WAY # 1		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3011I Amount of Each Disbursement this Period [REDACTED] 1093.91	
City PARSIPPANY	State NJ	Zip Code 07054-3826	Category/ Type [REDACTED]
Purpose of Disbursement TRAVEL		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. CAPITOL HILL CLUB		Date of Disbursement MM / DD / YYYY 02 / 14 / 2017	
Mailing Address 300 1ST STREET SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3011I Amount of Each Disbursement this Period [REDACTED] 1089.53	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type [REDACTED]
Purpose of Disbursement CATERING		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)..... ▶

[REDACTED] 2631.17

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. CHARLIE PALMER STEAK

Full Name (Last, First, Middle Initial)

Mailing Address 101 CONSTITUTION AVE NW

City WASHINGTON State DC Zip Code 20001-2133

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3011:

Amount of Each Disbursement this Period: 287.60

Memo Item

B. BB&T FINANCIAL

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3006:

Amount of Each Disbursement this Period: 967.31

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

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3011

Amount of Each Disbursement this Period: 694.39

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 967.31

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 SOUTH AKARD ST.

City
DALLAS

State
TX

Zip Code
75202

Purpose of Disbursement
CELL PHONE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	7

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I3011;
Amount of Each Disbursement this Period

[Redacted] 272.92

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T FINANCIAL

Mailing Address P.O. BOX 580340

City
CHARLOTTE

State
NC

Zip Code
28258

Purpose of Disbursement
CREDIT CARD PAYMENT-SEE MEMOS

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	7

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I3007C
Amount of Each Disbursement this Period

[Redacted] 4267.06

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City
FORT WORTH

State
TX

Zip Code
76155

Purpose of Disbursement
TRAVEL

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	1	7

FEC Identification Number

C [Redacted]

Transaction ID : SB21B.I3011
Amount of Each Disbursement this Period

[Redacted] 1015.00

Memo Item

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

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

4	2	6	7	.	0	6
---	---	---	---	---	---	---

4	2	6	7	.	0	6
---	---	---	---	---	---	---

**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)
Reclaim America PAC

A. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 208 SOUTH AKARD ST.

City DALLAS State TX Zip Code 75202

Purpose of Disbursement CELL PHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3011!

Amount of Each Disbursement this Period: 228.57

Memo Item

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 300 1ST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3012C

Amount of Each Disbursement this Period: 1786.55

Memo Item

C. SEA ISLAND

Full Name (Last, First, Middle Initial)

Mailing Address 100 CLOISTER DR.

City SEA ISLAND State GA Zip Code 31561

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 17 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3012

Amount of Each Disbursement this Period: 694.42

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. BB&T FINANCIAL		Date of Disbursement MM / DD / YYYY 05 / 17 / 2017
Mailing Address P.O. BOX 580340		FEC Identification Number C [] Transaction ID : SB21B.I3007 Amount of Each Disbursement this Period 2281.24
City CHARLOTTE	State NC	Zip Code 28258
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS		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. AMERICAN AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 17 / 2017
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C [] Transaction ID : SB21B.I3012 Amount of Each Disbursement this Period 450.00
City FORT WORTH	State TX	Zip Code 76155
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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement MM / DD / YYYY 05 / 17 / 2017
Mailing Address 208 SOUTH AKARD ST.		FEC Identification Number C [] Transaction ID : SB21B.I3012 Amount of Each Disbursement this Period 226.75
City DALLAS	State TX	Zip Code 75202
Purpose of Disbursement CELL PHONE		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)..... ▶

2281.24

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 05 / 17 / 2017
Mailing Address 1030 DELTA BLVD.		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3012I Amount of Each Disbursement this Period 1162.40
City ATLANTA	State GA	Zip Code 30354-1989
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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. NEWMAN'S CUSTOM FRAMES		Date of Disbursement MM / DD / YYYY 05 / 17 / 2017
Mailing Address 513 11TH ST., SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3012I Amount of Each Disbursement this Period 276.96
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FRAMES	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. BB&T FINANCIAL		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017
Mailing Address P.O. BOX 580340		FEC Identification Number C [REDACTED] Transaction ID : SB21B.I3007 Amount of Each Disbursement this Period 3101.38
City CHARLOTTE	State NC	Zip Code 28258
Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS	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)..... ▶

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

3101.38

**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)
Reclaim America PAC

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3013

Amount of Each Disbursement this Period: 1045.05

Memo Item

B. AT&T

Full Name (Last, First, Middle Initial)

Mailing Address 208 SOUTH AKARD ST.

City DALLAS State TX Zip Code 75202

Purpose of Disbursement CELL PHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3013

Amount of Each Disbursement this Period: 227.66

Memo Item

C. AVIS RENT-A-CAR

Full Name (Last, First, Middle Initial)

Mailing Address 6 SYLVAN WAY # 1

City PARSIPPANY State NJ Zip Code 07054-3826

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3013

Amount of Each Disbursement this Period: 153.78

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017
Mailing Address 1030 DELTA BLVD.		FEC Identification Number C [] Transaction ID : SB21B.I3013 Amount of Each Disbursement this Period [] 919.60
City ATLANTA	State GA	Zip Code 30354-1989
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 checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. WILLIAMS FLORAL & GARDEN		Date of Disbursement MM / DD / YYYY 06 / 13 / 2017
Mailing Address 242 S. 9TH ST.		FEC Identification Number C [] Transaction ID : SB21B.I3013 Amount of Each Disbursement this Period [] 262.01
City BURLINGTON	State CO	Zip Code 80807
Purpose of Disbursement FLOWERS		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. BERNSTEIN SHUR GROUP		Date of Disbursement MM / DD / YYYY 04 / 17 / 2017
Mailing Address 670 NORTH COMMERCIAL ST., STE. 108		FEC Identification Number C [] Transaction ID : SB21B.I3010 Amount of Each Disbursement this Period [] - 24000.00
City MANCHESTER	State NH	Zip Code 03105
Purpose of Disbursement VOID CHECK ISSUED 3/31/15-NO PAYMENT DUE		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).....▶	[] - 24000.00
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement MM / DD / YYYY 01 / 20 / 2017
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		FEC Identification Number C [] Transaction ID : SB21B.I3008 Amount of Each Disbursement this Period 3659.00
City TYSONS CORNER	State VA	Zip Code 22182-2245
Purpose of Disbursement DATA MANAGEMENT		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. CMDI		Date of Disbursement MM / DD / YYYY 01 / 20 / 2017
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		FEC Identification Number C [] Transaction ID : SB21B.I3008 Amount of Each Disbursement this Period 0.55
City TYSONS CORNER	State VA	Zip Code 22182-2245
Purpose of Disbursement MERCHANT FEE		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. CMDI		Date of Disbursement MM / DD / YYYY 02 / 24 / 2017
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		FEC Identification Number C [] Transaction ID : SB21B.I3008 Amount of Each Disbursement this Period 0.55
City TYSONS CORNER	State VA	Zip Code 22182-2245
Purpose of Disbursement MERCHANT FEE		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).....▶	3660.10
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)
Reclaim America PAC

A. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 11 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I3008
Amount of Each Disbursement this Period: 250.00

Memo Item

B. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 24 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I3008
Amount of Each Disbursement this Period: 0.55

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 21 / 2017

FEC Identification Number: C
Transaction ID : SB21B.I3008
Amount of Each Disbursement this Period: 0.55

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 251.10

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
SOFTWARE/DATA MANAGEMENT

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I3008!
Amount of Each Disbursement this Period
864.10

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL RD., STE. 400
SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement
MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I3009C
Amount of Each Disbursement this Period
0.55

Memo Item

Full Name (Last, First, Middle Initial)

C. FIREHOUSE STRATEGIES

Mailing Address 1851 BILTMORE ST., NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
STRATEGIC CONSULTING

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 20 / 2017

FEC Identification Number

C
Transaction ID : SB21B.I3009
Amount of Each Disbursement this Period
4000.00

Memo Item

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

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

4864.65

**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 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. GULA GRAHAM		Date of Disbursement MM / DD / YYYY 01 / 20 / 2017
Mailing Address 499 S. CAPITOL ST., SW STE. 420		FEC Identification Number C [] Transaction ID : SB21B.I3009: Amount of Each Disbursement this Period 6350.00
City WASHINGTON	State DC	Zip Code 20003
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. GULA GRAHAM		Date of Disbursement MM / DD / YYYY 05 / 09 / 2017
Mailing Address 499 S. CAPITOL ST., SW STE. 420		FEC Identification Number C [] Transaction ID : SB21B.I30094 Amount of Each Disbursement this Period 2806.50
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement FUNDRAISING CONSULTING/CATERING/POSTAGE		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. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC		Date of Disbursement MM / DD / YYYY 05 / 09 / 2017
Mailing Address 45 NORTH HILL DR., STE. 100		FEC Identification Number C [] Transaction ID : SB21B.I3009 Amount of Each Disbursement this Period 2500.00
City WARRENTON	State VA	Zip Code 20186
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).....▶	11656.50
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

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)
Reclaim America PAC

A. HUCKABY DAVIS LISKER INC.

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST, STE. 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3009

Amount of Each Disbursement this Period: 1726.82

Memo Item

B. IMPACT MANAGEMENT GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 124 W. CAPITOL, STE. 1886

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 20 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3009

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. NEBS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 64468

City ST. PAUL State MN Zip Code 55164-0000

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 11 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I3009

Amount of Each Disbursement this Period: 501.45

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7228.27

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)
Reclaim America PAC

A. SOMETHING ELSE STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 212 GOLDEN WILLOW CT.

City EASLEY State SC Zip Code 29642

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I30101

Amount of Each Disbursement this Period: 8000.00

Memo Item

B. SOMETHING ELSE STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 212 GOLDEN WILLOW CT.

City EASLEY State SC Zip Code 29642

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B.I30101

Amount of Each Disbursement this Period: 8000.00

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).....▶	16000.00
TOTAL This Period (last page this line number only).....▶	74877.53

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. CITIZENS FOR JOSH MANDEL INC		Date of Disbursement MM / DD / YYYY 06 / 23 / 2017
Mailing Address 24780 PENSHURST DRIVE		FEC Identification Number C 000494930 Transaction ID : SB23.I30075 Amount of Each Disbursement this Period 5000.00
City BEACHWOOD	State OH	Zip Code 44122
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name MANDEL, JOSH, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District:	

Full Name (Last, First, Middle Initial) B. ELISE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 23 / 2017
Mailing Address PO BOX 500		FEC Identification Number C 000547893 Transaction ID : SB23.I30091 Amount of Each Disbursement this Period 1000.00
City GLENS FALL	State NY	Zip Code 12801
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name STEFANIK, ELISE , M., ,		
Office Sought: <input checked="" 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) ▼	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) C. HATCH ELECTION COMMITTEE INC		Date of Disbursement MM / DD / YYYY 06 / 23 / 2017
Mailing Address PO BOX 900427		FEC Identification Number C 000104752 Transaction ID : SB23.I30095 Amount of Each Disbursement this Period 5000.00
City SALT LAKE	State UT	Zip Code 84090
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name HATCH, ORRIN , G, ,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: UT	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	11000.00