

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
RED ROCK RESORTS, INC. PAC

ADDRESS (number and street) **1505 S. PAVILION CENTER DR.**
Check if different than previously reported. (ACC) **LAS VEGAS NV 89135**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00263731 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period / / through / /

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

Signature of Treasurer S. LUCAS, STEVEN, , , [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

RED ROCK RESORTS, INC. 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="2020"/>	<input type="text" value="99528.26"/>	<input type="text" value="99528.26"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="87610.26"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="548.00"/>	<input type="text" value="11130.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="88158.26"/>	<input type="text" value="110658.26"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30000.00"/>	<input type="text" value="52500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="58158.26"/>	<input type="text" value="58158.26"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

RED ROCK RESORTS, INC. 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).....	528.00	4455.00
(ii) Unitemized	20.00	1675.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	548.00	6130.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	548.00	6130.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
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)).....▶	548.00	11130.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	548.00	11130.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	52500.00
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)) ..	30000.00	52500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30000.00	52500.00

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)	548.00	6130.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	548.00	6130.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

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

NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. ARENA, JOHN BRENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10201 KENTON PL
 City LAS VEGAS State NV Zip Code 89144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUN LAKES CASINO Occupation (for Individual) VICE PRESIDENT/GENERAL MANAG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 11 / 2020
Transaction ID : INCA21591
 Amount of Each Receipt this Period 38.00
 Memo Item

B. ARENA, JOHN BRENT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10201 KENTON PL
 City LAS VEGAS State NV Zip Code 89144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUN LAKES CASINO Occupation (for Individual) VICE PRESIDENT/GENERAL MANAG
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 25 / 2020
Transaction ID : INCA21601
 Amount of Each Receipt this Period 38.00
 Memo Item

C. HOELZER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 WEST SUNSET RD
 City HENDERSON State NV Zip Code 89014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNSET STATION Occupation (for Individual) ASSISTANT EXECUTIVE CHEF
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 11 / 2020
Transaction ID : INCA21589
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	96.00
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 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. HOELZER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1301 WEST SUNSET RD
 City HENDERSON State NV Zip Code 89014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUNSET STATION Occupation (for Individual) ASSISTANT EXECUTIVE CHEF
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 25 / 2020
Transaction ID : INCA21599
 Amount of Each Receipt this Period 20.00
 Memo Item

B. MANTERIS, ARTHUR N., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 HALLET COVE COURT
 City BOULDER CITY State NV Zip Code 89005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATION CASINOS LLC Occupation (for Individual) VP RACE & SPORTS OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1920.00

Date of Receipt 09 / 11 / 2020
Transaction ID : INCA21587
 Amount of Each Receipt this Period 96.00
 Memo Item

C. MANTERIS, ARTHUR N., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 227 HALLET COVE COURT
 City BOULDER CITY State NV Zip Code 89005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STATION CASINOS LLC Occupation (for Individual) VP RACE & SPORTS OPERATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1920.00

Date of Receipt 09 / 25 / 2020
Transaction ID : INCA21597
 Amount of Each Receipt this Period 96.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	212.00
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 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. PAIGE, MARK G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 95511

City LAS VEGAS	State NV	Zip Code 89114
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIESTA CASINO HOTEL	Occupation (for Individual) SECURITY DIRECTOR
----------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2020
Transaction ID : INCA21593

Amount of Each Receipt this Period
20.00

Memo Item

B. PAIGE, MARK G., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 95511

City LAS VEGAS	State NV	Zip Code 89114
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIESTA CASINO HOTEL	Occupation (for Individual) SECURITY DIRECTOR
----------------------------------------------------------	--------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2020
Transaction ID : INCA21603

Amount of Each Receipt this Period
20.00

Memo Item

C. PEARSON, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9281 SILVER ARROW CT.

City LAS VEGAS	State NV	Zip Code 89117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATION CASINOS LLC	Occupation (for Individual) DIR. OF DIRECT MAIL
----------------------------------------------------------	----------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2020
Transaction ID : INCA21586

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	65.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. PEARSON, DAVID, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9281 SILVER ARROW CT.

City LAS VEGAS	State NV	Zip Code 89117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATION CASINOS LLC	Occupation (for Individual) DIR. OF DIRECT MAIL
----------------------------------------------------------	----------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2020

Transaction ID : INCA21596

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 914 WILD WEST DRIVE

City HENDERSON	State NV	Zip Code 89015
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOULDER STATION HOTEL & CASINO	Occupation (for Individual) DIRECTOR OF MARKETING
---------------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2020

Transaction ID : INCA21588

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 914 WILD WEST DRIVE

City HENDERSON	State NV	Zip Code 89015
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOULDER STATION HOTEL & CASINO	Occupation (for Individual) DIRECTOR OF MARKETING
---------------------------------------------------------------------	------------------------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2020

Transaction ID : INCA21598

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
VON TOBEL, JON, , ,

Mailing Address 4306 SANDCASTLE DR.

City LAS VEGAS	State NV	Zip Code 89147
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATION CASINOS, LLC	Occupation (for Individual) DIR. OF PC DEVELOPMENT
-----------------------------------------------------------	-------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2020

Transaction ID : INCA21590

Amount of Each Receipt this Period
40.00

Memo Item

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

Mailing Address 4306 SANDCASTLE DR.

City LAS VEGAS	State NV	Zip Code 89147
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STATION CASINOS, LLC	Occupation (for Individual) DIR. OF PC DEVELOPMENT
-----------------------------------------------------------	-------------------------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2020

Transaction ID : INCA21600

Amount of Each Receipt this Period
40.00

Memo Item

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	80.00
TOTAL This Period (last page this line number only).....	528.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
RED ROCK RESORTS, INC. PAC

A. DCCC

Full Name (Last, First, Middle Initial)

Mailing Address 430 SOUTH CAPITOL STREET, SE, SECO

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement 011 Category/Type

Candidate Name **COMMITTEE, GENERAL PURPOSE, , ,**

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

State: District:

Date of Disbursement 09 / 17 / 2020

FEC Identification Number **C** C00000935
Transaction ID : EXPB21594
Amount of Each Disbursement this Period 15000.00

Memo Item

B. DSCC

Full Name (Last, First, Middle Initial)

Mailing Address 120 MARYLAND AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement 011 Category/Type

Candidate Name **COMMITTEE, GENERAL PURPOSE, , ,**

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

State: District:

Date of Disbursement 09 / 17 / 2020

FEC Identification Number **C** C00042366
Transaction ID : EXPB21595
Amount of Each Disbursement this Period 15000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement Category/Type

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).....▶	30000.00
TOTAL This Period (last page this line number only).....▶	30000.00