

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

Building and Restoring the American Dream Fund

ADDRESS (number and street) PO Box 30844

Check if different than previously reported. (ACC) Bethesda MD 20824

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00590356

3. IS THIS REPORT NEW OR AMENDED (N) (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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

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

Election on MM/DD/YYYY in the State of

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

Election on MM/DD/YYYY in the State of

5. Covering Period 07/01/2022 through 09/30/2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Carroll, Robert, E., , CPA

Type or Print Name of Treasurer

Signature of Treasurer Carroll, Robert, E., , CPA [Electronically Filed] Date 10/14/2022

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

Office Use Only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Building and Restoring the American Dream Fund**

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="2022"/>	<input type="text"/>	<input type="text" value="39170.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="23412.15"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="82210.07"/>	<input type="text" value="171858.49"/>
(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="105622.22"/>	<input type="text" value="211028.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="45158.16"/>	<input type="text" value="150564.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="60464.06"/>	<input type="text" value="60464.06"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**Building and Restoring the American Dream Fund**

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).....	1000.00	10900.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1000.00	10900.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	38500.00	110000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	39500.00	120900.00
12. Transfers From Affiliated/Other Party Committees.....	42710.07	50958.49
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)).....▶	82210.07	171858.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	82210.07	171858.49

**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 .....	19908.16	72314.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	19908.16	72314.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25250.00	78250.00
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)) ..	45158.16	150564.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	45158.16	150564.75

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	39500.00	120900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39500.00	120900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	19908.16	72314.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19908.16	72314.75

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

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

FOR LINE NUMBER: PAGE 6 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

NAME OF COMMITTEE (In Full)  
**Building and Restoring the American Dream Fund**

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

Mailing Address Information Requested

City State Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2022

Transaction ID : SA11AI.5428

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. ALEXION PHARMACEUTICALS INC. PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1455 PENNSYLVANIA AVE NW  
 SUITE 510  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00471169  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 10 / 2022  
**Transaction ID : SA11C.5364**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item

**B. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1505 PRINCE STREET  
 SUITE 300  
 City ALEXANDRIA State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00024968  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 29 / 2022  
**Transaction ID : SA11C.5361**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. American Podiatric Medical Association (APMA) PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9312 Old Georgetown Road  
 City Bethesda State MD Zip Code 20814  
 FEC ID number of contributing federal political committee. **C** C00008839  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 05 / 2022  
**Transaction ID : SA11C.5368**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND**

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

Mailing Address 1600 CAPITAL ONE DRIVE

City MCLEAN	State VA	Zip Code 22102
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FEC ID number of contributing federal political committee. **C** C00326595

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2022

**Transaction ID : SA11C.5371**

Amount of Each Receipt this Period  
3000.00

Memo Item

**B. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)**

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

Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY	State WA	Zip Code 98001
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FEC ID number of contributing federal political committee. **C** C00340943

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2022

**Transaction ID : SA11C.5369**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. DELOITTE POLITICAL ACTION COMMITTEE**

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

Mailing Address P.O. BOX 365

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

**Transaction ID : SA11C.5426**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. ENVISION HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1A BURTON HILLS BLVD.

City NASHVILLE	State TN	Zip Code 37215
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FEC ID number of contributing federal political committee. **C** C00398271

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
09		30		2022

**Transaction ID : SA11C.5422**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 245 SUMMER STREET, V9B

City BOSTON	State MA	Zip Code 02210
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FEC ID number of contributing federal political committee. **C** C00380550

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2022

**Transaction ID : SA11C.5374**

Amount of Each Receipt this Period  
3000.00

Memo Item

**C. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE**

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

City WASHINGTON	State DC	Zip Code 20001
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FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

**Transaction ID : SA11C.5360**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. KOCH INDUSTRIES, INC. POLITICAL ACTION COMMITTEE (KOCHPAC)**

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

Mailing Address 4111 EAST 37TH STREET NORTH

City WICHITA	State KS	Zip Code 67220
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FEC ID number of contributing federal political committee. **C** C00236489

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

**Transaction ID : SA11C.5425**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. National Association of Real Estate Investment Trusts (REIT) PAC**

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

Mailing Address 1875 I Street NW  
Suite 600

City Washington	State DC	Zip Code 20006
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FEC ID number of contributing federal political committee. **C** C00303339

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		08		2022

**Transaction ID : SA11C.5373**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. NATIONAL STRUCTURED SETTLEMENTS TRADE ASSOCIATION PAC**

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

Mailing Address 601 PENNSYLVANIA AVENUE  
SUITE 900 SOUTH

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00219444

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2022

**Transaction ID : SA11C.5430**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. ZENECA INC. POLITICAL ACTION COMMITTEE (AZPAC)**

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

Mailing Address C/O ZENECA INC.  
1800 CONCORD PIKE, PO BOX 15437

City WILMINGTON State DE Zip Code 19850

FEC ID number of contributing federal political committee. **C** C00279455

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 / D D / Y Y Y Y Y Y  
09 / 30 / 2022

**Transaction ID : SA11C.5420**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	38500.00

**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 12 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. Brad Wenstrup Victory Fund**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 30844

City Bethesda	State MD	Zip Code 20824
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FEC ID number of contributing federal political committee. **C** C00617480

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50958.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2022

**Transaction ID : SA12.5424**

Amount of Each Receipt this Period  
42710.07

Memo Item  
Transfer of Net Proceeds See Memo Items

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

Mailing Address 6105 Park Road

City Cincinnati	State OH	Zip Code 45243
--------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2022

**Transaction ID : SA12.5462**

Amount of Each Receipt this Period  
2100.00

Memo Item

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

Mailing Address 8280 Montgomery Rd.

City Cincinnati	State OH	Zip Code 45236
--------------------	-------------	-------------------

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 ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

**Transaction ID : SA12.5469**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	42710.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. Evans, James, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 East 4th Street  
 40th Floor  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Financial Group Occupation (for Individual) Executive Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 09 / 12 / 2022  
**Transaction ID : SA12.5463**  
 Amount of Each Receipt this Period 2100.00  
 Memo Item

**B. Horan, Terrence, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10298 Gentlewind  
 City Cincinnati State OH Zip Code 45242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Horan Associates Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : SA12.5471**  
 Amount of Each Receipt this Period 2100.00  
 Memo Item

**C. Linder, Martha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 East 4th Street  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 16 / 2022  
**Transaction ID : SA12.5458**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. Lindner, Carl, H., , III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 301 East 4th Street  
 Unit 40S  
 City Cincinnati State OH Zip Code 45202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Financial Group Occupation (for Individual) Co-CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 20 / 2022**  
**Transaction ID : SA12.5457**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Lindner, Frances, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7725 Buckingham Road  
 City Cincinnati State OH Zip Code 45243  
 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 **09 / 16 / 2022**  
**Transaction ID : SA12.5460**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Lindner, S. Craig, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7725 Buckingham Road  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) American Financial Group Occupation (for Individual) Co-CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **09 / 16 / 2022**  
**Transaction ID : SA12.5461**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. Oswald, Kenneth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7836 Concord Hills Place  
 City Cincinnati State OH Zip Code 45243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Oswald Company Inc Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2022  
**Transaction ID : SA12.5456**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Schaefer, George, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 851 Delaware Ridge Lane  
 City Cincinnati State OH Zip Code 45226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1550.00

Date of Receipt 09 / 20 / 2022  
**Transaction ID : SA12.5455**  
 Amount of Each Receipt this Period 1550.00  
 Memo Item

**C. Schiff, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4 Grandin Terrace  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JJ TR & Schiff & Co., Inc. Occupation (for Individual) Chairman & CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 12 / 2022  
**Transaction ID : SA12.5464**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 26
<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)  
**Building and Restoring the American Dream Fund**

**A. Steiner, Edward, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2624 Handasyde Ave.  
 City Cincinnati State OH Zip Code 45208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Keating Muething Klekamp Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : SA12.5467**  
 Amount of Each Receipt this Period 775.00  
 Memo Item

**B. Woeste, William, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3997 McMann Rd  
 City Cincinnati State OH Zip Code 45245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4900.00

Date of Receipt 08 / 26 / 2022  
**Transaction ID : SA12.5465**  
 Amount of Each Receipt this Period 4900.00  
 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  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	42710.07



**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)  
**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 14 / 2022	
Mailing Address 1 Skyview Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5408</b> Amount of Each Disbursement this Period [REDACTED] 768.40	
City Fort Worth	State TX	Zip Code 76155	Category/ Type 002
Purpose of Disbursement PAC Airfare Memo from PNC Bank on 9/2/22		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 1 Skyview Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5446</b> Amount of Each Disbursement this Period [REDACTED] 305.60	
City Fort Worth	State TX	Zip Code 76155	Category/ Type 002
Purpose of Disbursement Airfare		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 1 Skyview Dr		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5448</b> Amount of Each Disbursement this Period [REDACTED] 847.60	
City Fort Worth	State TX	Zip Code 76155	Category/ Type 002
Purpose of Disbursement Airfare		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____		

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

**A. CFS Compliance**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824

Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5367**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS Compliance**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824

Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8			0		2	0	2	2

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5366**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. CFS Compliance**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824

Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9			0		2	0	2	2

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5365**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

1	2	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

**A. CFS Compliance**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824

Purpose of Disbursement  
PAC Compliance Consulting

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 27 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5442

Amount of Each Disbursement this Period

[REDACTED] 61.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. Embassy Suites by Hilton**

Mailing Address 7001 N Yampa St

City  
Denver

State  
CO

Zip Code  
80249

Purpose of Disbursement  
PAC Lodging Memo from PNC Bank on 9/2/22

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 14 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5407

Amount of Each Disbursement this Period

[REDACTED] 558.76

Memo Item

Full Name (Last, First, Middle Initial)

**C. Marriott Downtown**

Mailing Address 222 North 10th St

City  
Omaha

State  
NE

Zip Code  
68102

Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2022

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.5443

Amount of Each Disbursement this Period

[REDACTED] 334.36

Memo Item

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

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

[REDACTED] 61.12

[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)  
**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address P.O. Box 856177

City Louisville State KY Zip Code 40285-6177

Purpose of Disbursement  
PAC SEE MEMO ITEMS

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
09 / 02 / 2022

FEC Identification Number  
  
**Transaction ID : SB21B.5378**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. PNC Bank**

Mailing Address P.O. Box 856177

City Louisville State KY Zip Code 40285-6177

Purpose of Disbursement  
See Memo Items

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
09 / 21 / 2022

FEC Identification Number  
  
**Transaction ID : SB21B.5440**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Sour Restaurant**

Mailing Address 95 East Freedom Way

City Cincinnati State OH Zip Code 45202

Purpose of Disbursement  
PAC Catering Memo from PNC Bank on 9/2/22

Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
08 / 13 / 2022

FEC Identification Number  
  
**Transaction ID : SB21B.5415**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER: (check only one)

21b    22    23    26    27  
 28a    28b    28c    29    30b

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NAME OF COMMITTEE (In Full)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

**A. The Townsend Group**

Mailing Address 1006 Pendelton Street

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
PAC Fundraising Consulting

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
 State: District:

Disbursement For:  
 Primary    General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5377**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Uber**

Mailing Address 1455 Market St

City  
San Francisco

State  
CA

Zip Code  
94103

Purpose of Disbursement  
PAC Transportation Memo from PNC Bank on 9/2/22

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
 State: District:

Disbursement For:  
 Primary    General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5406**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Uber**

Mailing Address 1455 Market St

City  
San Francisco

State  
CA

Zip Code  
94103

Purpose of Disbursement  
PAC Transportation Memo from PNC Bank on 9/2/22

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
 State: District:

Disbursement For:  
 Primary    General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5413**  
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Building and Restoring the American Dream Fund**

**A. Wuellner, Maggie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3422 Custer Street

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement PAC Strategic Campaign Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.5376**

Amount of Each Disbursement this Period: 300.00

Memo Item

**B. Wuellner, Maggie, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 3422 Custer Street

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement PAC Strategic Campaign Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 26 / 2022

FEC Identification Number: C

Transaction ID : **SB21B.5441**

Amount of Each Disbursement this Period: 300.00

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	600.00
<b>TOTAL</b> This Period (last page this line number only).....▶	19908.16

**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)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

**A. Aaron Bean for Congress**

Mailing Address 2640A Mitcham Dr

City  
Tallahassee

State  
FL

Zip Code  
32308

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**Bean, Aaron, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	29	/	2022

FEC Identification Number

C C00816983

**Transaction ID : SB23.5437**

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BOGNET FOR CONGRESS**

Mailing Address 1298 N. CHURCH ST.  
STE. C

City  
HAZLE TOWNSHIP

State  
PA

Zip Code  
18202

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**BOGNET, JIM, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: PA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	02	/	2022

FEC Identification Number

C C00735688

**Transaction ID : SB23.5385**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BRUCE POLIQUIN FOR CONGRESS**

Mailing Address P.O. BOX 524

City  
BANGOR

State  
ME

Zip Code  
04402

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**Poliquin, Bruce, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: ME District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	26	/	2022

FEC Identification Number

C C00788968

**Transaction ID : SB23.5382**

Amount of Each Disbursement this Period

2900.00

Memo Item

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

4400.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Building and Restoring the American Dream Fund**

**A. COMMITTEE TO ELECT JENNIFER-RUTH GREEN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 243

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

City CROWN POINT State IN Zip Code 46308

FEC Identification Number

Purpose of Disbursement  
PAC Political Contribution

C	C00782797
---	-----------

Candidate Name  
**GREEN, JENNIFER-RUTH, , ,**

011
Category/ Type

**Transaction ID : SB23.5387**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: IN District: 01

2000.00
---------

Memo Item

**B. HUIZENGA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 254

M M M	/	D D D	/	Y Y Y Y Y
09		16		2022

City ZEELAND State MI Zip Code 49464

FEC Identification Number

Purpose of Disbursement  
PAC Political Contribution

C	C00459297
---	-----------

Candidate Name  
**HUIZENGA, WILLIAM P, , ,**

011
Category/ Type

**Transaction ID : SB23.5417**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2022  Primary  General  Other (specify) ▼  
State: MI District: 04

5000.00
---------

Memo Item

**C. IN THE ARENA PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 7244

M M M	/	D D D	/	Y Y Y Y Y
09		29		2022

City LITTLE ROCK State AR Zip Code 72217

FEC Identification Number

Purpose of Disbursement  
PAC Political Contribution

C	C00623512
---	-----------

Candidate Name  
**IN THE ARENA PAC**

011
Category/ Type

**Transaction ID : SB23.5433**

Amount of Each Disbursement this Period

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

850.00
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Memo Item

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

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

7850.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

### A. JD VANCE FOR SENATE INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

Mailing Address PO BOX 6564

FEC Identification Number

C	C00783142
---	-----------

**Transaction ID : SB23.5389**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

City

CINCINNATI

State

OH

Zip Code

45206

Purpose of Disbursement

PAC Political Contributoin

011

Category/  
Type

Candidate Name

VANCE, J D, , ,

Office Sought:

House

Senate

President

Disbursement For: 2022

Primary

General

Other (specify) ▼

State: OH

District: 00

Full Name (Last, First, Middle Initial)

### B. KIGGANS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

Mailing Address P.O. BOX 5042

FEC Identification Number

C	C00776120
---	-----------

**Transaction ID : SB23.5384**

Amount of Each Disbursement this Period

1000.00
---------

Memo Item

City

VIRGINIA BEACH

State

VA

Zip Code

23471

Purpose of Disbursement

PAC Political Contribution

011

Category/  
Type

Candidate Name

KIGGANS, JENNIFER, , ,

Office Sought:

House

Senate

President

Disbursement For: 2022

Primary

General

Other (specify) ▼

State: VA

District: 02

Full Name (Last, First, Middle Initial)

### C. MADISON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2022

Mailing Address 645 HOWE AVE  
#1002

FEC Identification Number

C	C00795542
---	-----------

**Transaction ID : SB23.5391**

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

City

CUYAHOGA FALLS

State

OH

Zip Code

44221

Purpose of Disbursement

PAC Political Contribution

011

Category/  
Type

Candidate Name

GILBERT, MADISON GESIOTTO, , ,

Office Sought:

House

Senate

President

Disbursement For: 2022

Primary

General

Other (specify) ▼

State: OH

District: 13

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

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

11000.00
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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input 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)

**Building and Restoring the American Dream Fund**

Full Name (Last, First, Middle Initial)

### A. TOM BARRETT FOR CONGRESS

Mailing Address PO BOX 15221

City  
LANSING

State  
MI

Zip Code  
48901

Purpose of Disbursement  
PAC Political Contribution

011

Category/  
Type

Candidate Name

**BARRETT, THOMAS MORE, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: MI District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	9		2	0	2	2		

FEC Identification Number

C C00793976

**Transaction ID : SB23.5432**

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### B.

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

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---	---	---

FEC Identification Number

C

Amount of Each Disbursement this Period

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

Memo Item

Full Name (Last, First, Middle Initial)

### C.

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

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
---	---	---	---	---	---	---	---	---	---	---	---

FEC Identification Number

C

Amount of Each Disbursement this Period

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

Memo Item

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

2	0	0	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---

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

2	5	2	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---	---	---