

**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

National Funeral Directors Association of the United States Inc

ADDRESS (number and street)

13625 Bishops Drive

Check if different
than previously
reported. (ACC)

Brookfield

WI

53005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00204008

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

C

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

C

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

01

01

2018

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

03

31

2018

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

Hightower, Bryant, , CFSP

Type or Print Name of Treasurer

Signature of Treasurer

Hightower, Bryant, , CFSP

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

04

11

2018

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**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

National Funeral Directors Association of the United States Inc

Report Covering the Period:

From:

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

To:

M M	/	D D	/	Y Y Y Y Y Y
03		31		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y Y</div><div>2018</div></div>		<div><div></div><div>8571.37</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>8571.37</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>21170.00</div></div>	<div><div></div><div>21170.00</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>29741.37</div></div>	<div><div></div><div>29741.37</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>8500.00</div></div>	<div><div></div><div>8500.00</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>21241.37</div></div>	<div><div></div><div>21241.37</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

National Funeral Directors Association of the United States Inc

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	8

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).....

19750.00

19750.00

(ii) Unitemized

1420.00

1420.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

21170.00

21170.00

(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)

21170.00

21170.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))

21170.00

21170.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

21170.00

21170.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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.....	8500.00	8500.00
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)) ..	8500.00	8500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8500.00	8500.00

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)	21170.00	21170.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21170.00	21170.00
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: PAGE 6 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Arrington, Bob, , ,

Mailing Address 14 Emerald Ridge

City
Jackson

State
TN

Zip Code
38305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arrington Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2018

Transaction ID : SA11AI.19130

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Arrington, Bob, , ,

Mailing Address 14 Emerald Ridge

City
Jackson

State
TN

Zip Code
38305

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Arrington Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 22 / 2018

Transaction ID : SA11AI.19131

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Booker, G., William, ,

Mailing Address PO Box 25440

City
Little Rock

State
AR

Zip Code
72221-5440

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Roller Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.19151

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL 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: PAGE 7 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Bowman, Cuck, , ,

Mailing Address 1212 W 2nd Street

City
Liberal

State
KS

Zip Code
67901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brenneman FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11Al.19165

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Bowman, Cuck, , ,

Mailing Address 1212 W 2nd Street

City
Liberal

State
KS

Zip Code
67901

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brenneman FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11Al.19166

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Brainard, Scott, E, ,

Mailing Address 522 Adams St

City
Wausau

State
WI

Zip Code
54403-3506

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brainard Funeral Home

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 09 / 2018

Transaction ID : SA11Al.19090

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 8 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Brown, Jennie, , ,

Mailing Address 660 Brighton Ave

City
Portland

State
ME

Zip Code
04102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Answering Service for Director

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11Al.19175

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Brown, Jennie, , ,

Mailing Address 660 Brighton Ave

City
Portland

State
ME

Zip Code
04102

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Answering Service for Director

Occupation (for Individual)

Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11Al.19176

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Burr, Gary, M., ,

Mailing Address 7150 County Road 13

City
Bryan

State
OH

Zip Code
43506-1132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2018

Transaction ID : SA11Al.19134

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 9 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Cahall, Kenneth, A., ,

Mailing Address 204 W State St

City
Georgetown

State
OH

Zip Code
45121-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cahall Funeral Home Inc

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11Al.19173

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Cahall, Kenneth, A., ,

Mailing Address 204 W State St

City
Georgetown

State
OH

Zip Code
45121-1231

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cahall Funeral Home Inc

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11Al.19174

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

c. Camp, Gregory, E., ,

Mailing Address 3101 Rose HI

City
Woodstock

State
VT

Zip Code
05091-1052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cabot Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA11Al.19160

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Christian, Chris, E., ,

Mailing Address PO Box 775

City
Rogersville

State
TN

Zip Code
37857-0775

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Christian-Sells FH

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 07 / 2018

Transaction ID : SA11AI.19103

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Chute, Bradley, J., ,

Mailing Address 1850 W Main St

City
Newark

State
OH

Zip Code
43055-1134

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Vensil & Chute FH

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 08 / 2018

Transaction ID : SA11AI.19124

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Clayton, David, Andy, ,

Mailing Address 6645 Dunsdin Dr

City
Plainfield

State
IN

Zip Code
46168-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Indiana Funeral Directors Assn

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19155

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 11 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Clayton, David, Andy, ,

Mailing Address 6645 Dunsdin Dr

City
Plainfield

State
IN

Zip Code
46168-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Indiana Funeral Directors Assn

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11Al.19156

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Clayton, David, Andy, ,

Mailing Address 6645 Dunsdin Dr

City
Plainfield

State
IN

Zip Code
46168-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Indiana Funeral Directors Assn

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11Al.19157

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

c. Clayton, David, Andy, ,

Mailing Address 6645 Dunsdin Dr

City
Plainfield

State
IN

Zip Code
46168-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Indiana Funeral Directors Assn

Occupation (for Individual)
Funeral Director

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
03 / 17 / 2018

Transaction ID : SA11Al.19158

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 12 OF 31
(check only one)

<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)

National Funeral Directors Association of the United States Inc

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

A. Clayton, David, Andy, ,

Mailing Address 6645 Dunsdin Dr

City
Plainfield

State
IN

Zip Code
46168-7546

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Indiana Funeral Directors Assn

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19159

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Easterling, Benjamin, R, , Jr

Mailing Address 624 Cherry St E

City

Canal Fulton

State
OH

Zip Code
44614-1220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Swigart-Easterling Funeral Home Inc

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2018

Transaction ID : SA11AI.19132

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Evans, Richard, W, ,

Mailing Address 1705 W Broadway St

City

Missoula

State
MT

Zip Code
59808-2013

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Garden City Funeral Home and Crematory

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2018

Transaction ID : SA11AI.19184

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL 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: PAGE 13 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Farrar-Cantrell, Laura, , ,

Mailing Address PO Box 1025

City
Danridge

State
TN

Zip Code
37725

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Farrar FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 13 / 2018

Transaction ID : SA11AI.19150

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Folino, Pasquale, , ,

Mailing Address 12 Ocean Ave

City

New London

State

CT

Zip Code

06320

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Thomas L Neilan & Sons

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : SA11AI.19168

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Gilligan, T, Scott, ,

Mailing Address 3734 Eastern Ave

City

Cincinnati

State

OH

Zip Code

45226-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Gilligan Law Offices

Occupation (for Individual)

General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11AI.19177

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 14 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Gilligan, T, Scott, ,

Mailing Address 3734 Eastern Ave

City
Cincinnati

State
OH

Zip Code
45226-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Gilligan Law Offices

Occupation (for Individual)
General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11AI.19178

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Goss, Adam, , ,

Mailing Address PO Box 396

City
Enosburg

State
VT

Zip Code
05450

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Spears FH

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA11AI.19100

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Hicks, Lori, , ,

Mailing Address 6791 Tylersville Rd

City
Mason

State
OH

Zip Code
45040

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mueller FH

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 09 / 2018

Transaction ID : SA11AI.19147

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 15 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Hightower, Bryant, , , CFSP

Mailing Address PO Box 215

City
Carrollton

State
GA

Zip Code
30112-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Martin & Hightower F H Inc Heritage Ch

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19141

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Hightower, Bryant, , , CFSP

Mailing Address PO Box 215

City
Carrollton

State
GA

Zip Code
30112-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Martin & Hightower F H Inc Heritage Ch

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19142

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

c. Hightower, Bryant, , , CFSP

Mailing Address PO Box 215

City
Carrollton

State
GA

Zip Code
30112-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Martin & Hightower F H Inc Heritage Ch

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19143

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

750.00

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 16 OF 31

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Hightower, William, , ,

Mailing Address 318 Gordon Street

City
Bremen

State
GA

Zip Code
30110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hightower FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 24 / 2018

Transaction ID : SA11AI.19144

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Hunn, Jacob, L, ,

Mailing Address Rt2 Box 2070-30

City
Checotah

State
OK

Zip Code
74426-9602

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hunn Black & Merritt FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19104

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Johnson, Julie, Ann, ,

Mailing Address 2595 Rockdale Rd

City
Dubuque

State
IA

Zip Code
52003

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

A. T. Hutchins LLC Funeral & C

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19111

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 17 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Lamson, Lee, Jr., ,

Mailing Address 17 Western Ave

City

East Millinocket

State

ME

Zip Code

04430-1036

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lamson Funeral Homes

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2018

Transaction ID : SA11AI.19120

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Lindsey, Walter, H., III,

Mailing Address 123 N Market St

City

Loudonville

State

OH

Zip Code

44842-1216

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Lindsey Funeral Home Inc

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2018

Transaction ID : SA11AI.19163

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Marlin, Amanda, , ,

Mailing Address 3009 Columbia Ave

City

Franklin

State

TN

Zip Code

37064

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Williamson Memorial FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19139

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 18 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Mitchell, John, O, IV,

Mailing Address 6500 York Rd

City
Baltimore

State
MD

Zip Code
21212-2114

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Mitchell-Wiedefeld Funeral Hm

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11AI.19169

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Morin, Peter, C., ,

Mailing Address 120 Gilsum Road

City
Surry

State
NH

Zip Code
03431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19107

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Morin, Peter, C., ,

Mailing Address 120 Gilsum Road

City
Surry

State
NH

Zip Code
03431

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19108

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 19 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Morin, Peter, C., ,

Mailing Address 120 Gilsum Road

City
SurryState
NHZip Code
03431FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19109

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Musgrove, Jeffrey, Lucas, ,

Mailing Address 3220 Brycelor Dr

City
EugeneState
ORZip Code
97405-2316FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Musgrove Family MortuaryOccupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19121

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Nie, Douglas, R., II,

Mailing Address 3767 W. Liberty Road

City
Ann ArborState
MIZip Code
48108FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Nie Family Funeral Home & Cremation SeOccupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19116

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

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: PAGE 20 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Nie, Douglas, R., II,

Mailing Address 3767 W. Liberty Road

City

Ann Arbor

State

MI

Zip Code

48108

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Nie Family Funeral Home & Cremation Se

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19117

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Palmer, Steve, A, ,

Mailing Address Po Box 352

City

Cottonwood

State

AZ

Zip Code

86326

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Westcott FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19140

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Pearson, David, R, ,

Mailing Address PO Box 1444

City

Galesburg

State

IL

Zip Code

61401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Hinchliff-Pearson-West Inc

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 21 / 2018

Transaction ID : SA11AI.19126

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Pearson, David, R, ,

Mailing Address PO Box 1444

City
Galesburg

State
IL

Zip Code
61401

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hinchliff-Pearson-West Inc

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 21 / 2018

Transaction ID : SA11AI.19127

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Pellerin, Eugene, , ,

Mailing Address PO Box 130

City
Breux Bridge

State
LA

Zip Code
70517-0130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pellerin Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11AI.19128

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Pellerin, Eugene, , ,

Mailing Address PO Box 130

City
Breux Bridge

State
LA

Zip Code
70517-0130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Pellerin Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA11AI.19129

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 22 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Phillips, Rick, D., ,

Mailing Address 302 9th St NE

City

Wenatchee

State

WA

Zip Code

98802-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Chapel of the Valley

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : SA11AI.19123

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Roach, David, W., ,

Mailing Address 2480 Macland Rd SW

City

Marietta

State

GA

Zip Code

30064-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

West Cobb FH

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA11AI.19115

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Robinson, Christopher P., , ,

Mailing Address PO Box 387

City

Easley

State

SC

Zip Code

29641-0387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19101

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL 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: PAGE 23 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Robinson, Christopher P., , ,

Mailing Address PO Box 387

City
Easley

State
SC

Zip Code
29641-0387

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19102

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Rossi, Peter, P., ,

Mailing Address 1884 North Rd NE

City
Warren

State
OH

Zip Code
44483-3653

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Peter Rossi & Son Memorial Chapel

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 19 / 2018

Transaction ID : SA11AI.19092

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Rosson, Robert, , ,

Mailing Address PO Box 1200

City
Oxford

State
MS

Zip Code
38655-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Waller Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19152

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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 24 OF 31

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Ruffino, Marissa, , ,

Mailing Address PO Box 82534

City

Baton Rouge

State

LA

Zip Code

70884

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Louisiana FDA

Occupation (for Individual)

Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19148

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Shank, Robert, L., , Sr.

Mailing Address PO Box 445

City

Perrysburg

State

OH

Zip Code

43552-0445

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Witzler-Shank Funeral Home

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : SA11AI.19137

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Sims, Marc, , ,

Mailing Address PO Box 289

City

Dyer

State

TN

Zip Code

38330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Karnes & Sons

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 07 / 2018

Transaction ID : SA11AI.19146

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL 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: PAGE 25 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Smith, Eric, , ,

Mailing Address 6382 Clark Rd

City
ParadiseState
CAZip Code
95969FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Rose Chapel MortuaryOccupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11AI.19125

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Smith, Justin, , ,

Mailing Address 1415 N Rock Rd

City
DerbyState
KSZip Code
67037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smith Family MortuariesOccupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11AI.19097

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Smith, Justin, , ,

Mailing Address 1415 N Rock Rd

City
DerbyState
KSZip Code
67037FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Smith Family MortuariesOccupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11AI.19098

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 26 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Sullivan, Melissa, , ,

Mailing Address PO Box 2176

City
Columbus

State
OH

Zip Code
43221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ohio Funeral Directors Asn

Occupation (for Individual)
Asst Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19153

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Sullivan, Melissa, , ,

Mailing Address PO Box 2176

City
Columbus

State
OH

Zip Code
43221

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Ohio Funeral Directors Asn

Occupation (for Individual)
Asst Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19154

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Swisher, Joel, L., ,

Mailing Address 112 Ridgedale Ln

City
Alexandria

State
LA

Zip Code
71302-8601

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hixson Brothers LLC

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2018

Transaction ID : SA11AI.19105

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 27 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Tilghman, Marck, , ,

Mailing Address 38 N Forklanding Rd

City
Maple Shade

State
NJ

Zip Code
08052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mark C Tilghman FH

Occupation (for Individual)

Funeral director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA11AI.19171

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Tilghman, Marck, , ,

Mailing Address 38 N Forklanding Rd

City
Maple Shade

State
NJ

Zip Code
08052

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Mark C Tilghman FH

Occupation (for Individual)

Funeral director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA11AI.19172

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Tomon, Joseph A., , , Jr

Mailing Address PO Box 188

City
Ellwood City

State
PA

Zip Code
16117-0188

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Joseph A Tomon Jr F H & Crematory

Occupation (for Individual)

Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 28 / 2018

Transaction ID : SA11AI.19118

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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: PAGE 28 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Trainor, Carl, W., ,

Mailing Address 143 Schuyler St

City
Boonville

State
NY

Zip Code
13309-1016

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Trainor Funeral Home Inc

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
01 / 08 / 2018

Transaction ID : SA11AI.19088

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Valdez, Erlinda, , ,

Mailing Address 1524 9th St

City
Sanger

State
CA

Zip Code
93657

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wallin's Sanger FH

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2018

Transaction ID : SA11AI.19180

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Vaughan, Brian, W., ,

Mailing Address 1789 E Woodcrest Dr S

City
Martinsville

State
IN

Zip Code
46151-5994

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2018

Transaction ID : SA11AI.19119

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 29 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Ward, Glenn, , ,

Mailing Address PO Box 377

City
Bradford

State
VT

Zip Code
05033

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Hale Funeral Home

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA11Al.19161

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Wenig, John, W, ,

Mailing Address PO Box 141

City
Sheboygan Falls

State
WI

Zip Code
53085-0141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wenig Funeral Homes

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11Al.19113

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Wenig, John, W, ,

Mailing Address PO Box 141

City
Sheboygan Falls

State
WI

Zip Code
53085-0141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wenig Funeral Homes

Occupation (for Individual)
Funeral Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 01 / 2018

Transaction ID : SA11Al.19114

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

750.00

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

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

FOR LINE NUMBER: PAGE 30 OF 31
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Funeral Directors Association of the United States Inc

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

A. Wenig, John, W, ,

Mailing Address PO Box 141

City
Sheboygan Falls

State
WI

Zip Code
53085-0141

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Wenig Funeral Homes

Occupation (for Individual)
Funeral Director

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
03 / 31 / 2018

Transaction ID : SA11AI.19181

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B.

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

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

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

500.00

19750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 31

<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)

National Funeral Directors Association of the United States Inc

Full Name (Last, First, Middle Initial)

A. DUNCAN D. HUNTER FOR CONGRESS

Mailing Address PO BOX 1545

City
EL CAJONState
CAZip Code
92022

Purpose of Disbursement

Candidate Name

DUNCAN D. HUNTER FOR CONGRESS

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: CA

District: 50

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	8		

FEC Identification Number

C C00433524**Transaction ID : SB23.19074**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STIVERS FOR CONGRESS

Mailing Address 4679 WINTERSET DRIVE

City
COLUMBUSState
OHZip Code
43220

Purpose of Disbursement

Candidate Name

STIVERS, STEVE MR., , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District: 15

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			2	9			2	0	1	8		

FEC Identification Number

C H8OH15076**Transaction ID : SB23.19075**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Trey for Congress

Mailing Address 1641 Longworth House

City
WashingtonState
DCZip Code
20515

Purpose of Disbursement

Candidate Name

HOLLINGSWORTH, TREY, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN

District: 09

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	8		

FEC Identification Number

C H6IN09176**Transaction ID : SB23.19077**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

8500.00

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

8500.00