

**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

Revive America PAC

ADDRESS (number and street) ▼

610 S. Boulevard

☐ Check if different than previously reported. (ACC)

Tampa

FL

33606

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00506105

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☒ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

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

in the State of

(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

in the State of

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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

Type or Print Name of Treasurer Nancy H. Watkins

Signature of Treasurer Nancy H. Watkins

[Electronically Filed]

Date

07

10

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Revive America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		70505.25
(b) Cash on Hand at Beginning of Reporting Period.....	70505.25	
(c) Total Receipts (from Line 19)	15461.35	15461.35
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	85966.60	85966.60
7. Total Disbursements (from Line 31)	74958.65	74958.65
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11007.95	11007.95
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Revive America PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
01	/	01	/	2015

To:

M M	/	D D	/	Y Y Y Y Y
06	/	30	/	2015

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).....

1250.00

1250.00

(ii) Unitemized

4211.35

4211.35

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

5461.35

5461.35

(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)

5461.35

5461.35

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).....

10000.00

10000.00

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))..... ▶

15461.35

15461.35

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

15461.35

15461.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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	72458.65	72458.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	72458.65	72458.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	2500.00	2500.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	74958.65	74958.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74958.65	74958.65

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	5461.35	5461.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5461.35	5461.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	72458.65	72458.65
37. Offsets to Operating Expenditures (from Line 15, page 3).....	10000.00	10000.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	62458.65	62458.65

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

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

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 18

☒ 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)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Carolyn Dodd

Mailing Address 257 Montair Drive

City

Danville

State

CA

Zip Code

94526

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 24 / 2015

Transaction ID : SA11AI.26456

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Allen H. Simon

Mailing Address 1383 N. Criss Street

City

Chandler

State

AZ

Zip Code

85226

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 11 / 2015

Transaction ID : SA11AI.26439

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Maynard Stetten

Mailing Address 6020 S. Highway 53

City

Smithfield

State

KY

Zip Code

40068

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

retired

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 18 / 2015

Transaction ID : SA11AI.26447

Amount of Each Receipt this Period

250.00

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 18

(check only one)

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

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NAME OF COMMITTEE (In Full)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Enrique Villegas

Mailing Address 16018 Arbela Drive

City State Zip Code
 Whittier CA 90603

FEC ID number of contributing
federal political committee.

C

Name of Employer

self-employed

Occupation

equipment leasing

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 06 2015

Transaction ID : SA11AI.26401

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

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

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

250.00

1250.00

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 18
(check only one)

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

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NAME OF COMMITTEE (In Full)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Rapid Response Television, LLC

Mailing Address 4850 Wright Road, #168

City State Zip Code
 Stafford TX 77477

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 17 2015

Transaction ID : SA15.26368

Amount of Each Receipt this Period

10000.00

media refund

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

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

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

10000.00

10000.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Revive America PAC

A. Ashby Law, PLLC

Mailing Address 717 Princess Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement	legal services
1. Legal Services 2. Legal Services 3. Legal Services 4. Legal Services 5. Legal Services 6. Legal Services 7. Legal Services 8. Legal Services 9. Legal Services 10. Legal Services 11. Legal Services 12. Legal Services 13. Legal Services 14. Legal Services 15. Legal Services 16. Legal Services 17. Legal Services 18. Legal Services 19. Legal Services 20. Legal Services 21. Legal Services 22. Legal Services 23. Legal Services 24. Legal Services 25. Legal Services 26. Legal Services 27. Legal Services 28. Legal Services 29. Legal Services 30. Legal Services 31. Legal Services 32. Legal Services 33. Legal Services 34. Legal Services 35. Legal Services 36. Legal Services 37. Legal Services 38. Legal Services 39. Legal Services 40. Legal Services 41. Legal Services 42. Legal Services 43. Legal Services 44. Legal Services 45. Legal Services 46. Legal Services 47. Legal Services 48. Legal Services 49. Legal Services 50. Legal Services 51. Legal Services 52. Legal Services 53. Legal Services 54. Legal Services 55. Legal Services 56. Legal Services 57. Legal Services 58. Legal Services 59. Legal Services 60. Legal Services 61. Legal Services 62. Legal Services 63. Legal Services 64. Legal Services 65. Legal Services 66. Legal Services 67. Legal Services 68. Legal Services 69. Legal Services 70. Legal Services 71. Legal Services 72. Legal Services 73. Legal Services 74. Legal Services 75. Legal Services 76. Legal Services 77. Legal Services 78. Legal Services 79. Legal Services 80. Legal Services 81. Legal Services 82. Legal Services 83. Legal Services 84. Legal Services 85. Legal Services 86. Legal Services 87. Legal Services 88. Legal Services 89. Legal Services 90. Legal Services 91. Legal Services 92. Legal Services 93. Legal Services 94. Legal Services 95. Legal Services 96. Legal Services 97. Legal Services 98. Legal Services 99. Legal Services 100. Legal Services	

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three 7-segment displays are shown, each with a label above it. The first display is labeled 'M M' and shows the number '02'. The second display is labeled 'D D' and shows the number '05'. The third display is labeled 'Y Y Y Y' and shows the year '2015'.

Transaction ID : SB21B.26334

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Campaign Solutions

Mailing Address 117 N. Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement	website hosting
-------------------------	-----------------

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.26417

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	50

Full Name (Last, First, Middle Initial)

C. Campaign Solutions

Mailing Address 117 N. Saint Asaph Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement	website hosting
-------------------------	-----------------

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.26436

Amount of Each Disbursement this Period



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

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

400.00

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Revive America PAC

A. Capital One Bank

Category/
Type

33.00

State: District:

B. Capital One Bank

MM / DD / YYYY

Category/
Type

63.52

State: District:

C. Capital One Bank

Category/
Type

28.00

State: District:

Age Group	Percentage
18-24	124.52
25-34	~100
35-44	~80
45-54	~60
55-64	~40
65-74	~20
75-84	~10
85+	~5

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

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
service charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 24 2015
Transaction ID : SB21B.26381

Amount of Each Disbursement this Period

60.95

Full Name (Last, First, Middle Initial)

B. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 01 2015
Transaction ID : SB21B.26411

Amount of Each Disbursement this Period

28.00

Full Name (Last, First, Middle Initial)

C. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
service charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 24 2015
Transaction ID : SB21B.26412

Amount of Each Disbursement this Period

19.49

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

108.44

**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 12 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 01 / 2015

Transaction ID : SB21B.26450

Amount of Each Disbursement this Period

28.00

Full Name (Last, First, Middle Initial)

B. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
service charge

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 22 / 2015

Transaction ID : SB21B.26451

Amount of Each Disbursement this Period

19.53

Full Name (Last, First, Middle Initial)

C. Capital One Bank

Mailing Address P. O. Box 4139

City Houston State TX Zip Code 77210

Purpose of Disbursement
credit card processing

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 01 / 2015

Transaction ID : SB21B.26461

Amount of Each Disbursement this Period

28.00

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

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

75.53

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Revive America PAC

A. Capital One Bank

Category/
Type

60.46

State: District:

B. Maelstrom Technology Solutions, LLC

MM / DD / YYYY

Category/
Type

52.42

State: District:

C. Maelstrom Technology Solutions, LLC

Category/
Type

39.49

State: District:

152.37

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Revive America PAC

Age Group	Percentage
18-24	1.74
25-34	1.74
35-44	1.74
45-54	1.74
55-64	1.74
65-74	1.74
75-84	1.74
85+	1.74

MM / DD / YYYY

38.86

06 / 24 / 2015

16.71

Age Group	Number of People
13-17	10
18-24	20
25-34	30
35-44	40
45-54	50
55-64	60
65-74	70
75-84	80
85+	90

**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 15 OF 18

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Revive America PAC

Full Name (Last, First, Middle Initial)

A. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
PAC management

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
02 09 2015

Transaction ID : SB21B.26343

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
email marketing/domain renewal

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 02 2015

Transaction ID : SB21B.26355

Amount of Each Disbursement this Period

2866.88

Full Name (Last, First, Middle Initial)

C. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City Kearneysville State WV Zip Code 25430

Purpose of Disbursement
travel/meals

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 12 2015

Transaction ID : SB21B.26364

Amount of Each Disbursement this Period

8068.63

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

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

25935.51

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

Revive America PAC

A. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City	State	Zip Code
Kearneysville	WV	25430

Purpose of Disbursement	email marketing
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Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.26369

Amount of Each Disbursement this Period

2268.13

Full Name (Last, First, Middle Initial)

B. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City	State	Zip Code
Kearneysville	WV	25430

Purpose of Disbursement
PAC management

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

03 / 20 / 2015

Transaction ID : SB21B.26372

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

C. Opinion Strategies, LLC

Mailing Address 415 Paso Corto Drive

City	State	Zip Code
Kearneysville	WV	25430

Purpose of Disbursement	PAC management
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Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President

State: District:

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

Transaction ID : SB21B.26435

Amount of Each Disbursement this Period

2500.00

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

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

19768.13

☒	21b	☐	22	☐	23	☐	24	☐	25	☐	26
☐	27	☐	28a	☐	28b	☐	28c	☐	29	☐	30b

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71759.95

	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

Revive America PAC

A. Home School Foundation

Date of Disbursement



Three 7-segment displays are shown, each with a label above it. The first display shows '06', the second shows '08', and the third shows '2015'. Each display has a label above it: 'M M' for the first, 'D D' for the second, and 'Y Y Y Y' for the third. The displays are separated by slashes.

Transaction ID : SB29.26428

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2500.00

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

2500.00