

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.

SECURING THE REPUBLIC FOR OUR NEXT GENERATION

ADDRESS (number and street)

Check if different than previously reported. (ACC)

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

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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

MCDANIEL, BEN, , ,

Type or Print Name of Treasurer

Signature of Treasurer MCDANIEL, BEN, , , [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

SECURING THE REPUBLIC FOR OUR NEXT GENERATION

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="2023"/>		2619.32
(b) Cash on Hand at Beginning of Reporting Period.....	2619.32	
(c) Total Receipts (from Line 19)	33352.57	33352.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35971.89	35971.89
7. Total Disbursements (from Line 31).....	3238.72	3238.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	32733.17	32733.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

SECURING THE REPUBLIC FOR OUR NEXT GENERATION

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).....	2250.00	2250.00
(ii) Unitemized	1000.75	1000.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3250.75	3250.75
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4250.75	4250.75
12. Transfers From Affiliated/Other Party Committees.....	29101.82	29101.82
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)).....▶	33352.57	33352.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	33352.57	33352.57

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	3238.72	3238.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3238.72	3238.72
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 (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)) ..	3238.72	3238.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3238.72	3238.72

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)	4250.75	4250.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4250.75	4250.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3238.72	3238.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3238.72	3238.72

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

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

NAME OF COMMITTEE (In Full)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

A. WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3250.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2023

Transaction ID : SA11C.83953

Amount of Each Receipt this Period
450.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

B. CECI, JOSEPH, , ,

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

Mailing Address 124 IBERVILLE ST

City MADISON	State AL	Zip Code 35758-8161
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BRELAND COMPANIES	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	17	/	2023

Transaction ID : SA11A.83955

Amount of Each Receipt this Period
250.00

Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C. WINRED

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

Mailing Address P.O. BOX 9891

City ARLINGTON	State VA	Zip Code 22219-1891
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FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3250.75

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2023

Transaction ID : SA11C.84133

Amount of Each Receipt this Period
2200.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 7 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

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

Mailing Address 4951 IRON HORSE WAY

City IMMOKALEE State FL Zip Code 34142-9654

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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2023

Transaction ID : SA11A.84134

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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

Mailing Address 4951 IRON HORSE WAY

City IMMOKALEE State FL Zip Code 34142-9654

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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2023

Transaction ID : SA11A.84135

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

EARMARKED FROM WINRED

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	2250.00

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 13	
(check only one)			
<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)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN REVIVAL PAC

Mailing Address 3337 N HULLEN STREET
SUITE 301

City METAIRIE	State LA	Zip Code 70002-3473
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FEC ID number of contributing federal political committee. **C** C00639229

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

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		23		2023

Transaction ID : SA11C.80915

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
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: (check only one)	PAGE 9 OF 13
<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)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

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

Mailing Address PO BOX 18502

City HUNTSVILLE	State AL	Zip Code 35804-8502
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FEC ID number of contributing federal political committee. **C** C00835363

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
29101.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		18		2023

Transaction ID : SA12.86867

Amount of Each Receipt this Period
7559.62

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. COLLAZO, FRANCISCO, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6728 ODYSSEY DR.

City HUNTSVILLE	State AL	Zip Code 35806-3302
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
COLSA CORP PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2023

Transaction ID : SA12.86868

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: STRONG VICTORY FUND

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

Mailing Address 751 COUNTY ROAD 138

City FLORENCE	State AL	Zip Code 35634-6346
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		07		2023

Transaction ID : SA12.86870

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

JFC ATTRIB: STRONG VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	7559.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 13
<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)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

A. SILVER, LARRY, D.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1001 EAST TELECOM DRIVE
 City BOCA RATON State FL Zip Code 33431-4422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER COMPANIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 06 / 2023**
Transaction ID : SA12.86869
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

B. STRONG VICTORY FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 18502
 City HUNTSVILLE State AL Zip Code 35804-8502
 FEC ID number of contributing federal political committee. **C** C00835363
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 29101.82

Date of Receipt **06 / 30 / 2023**
Transaction ID : SA12.113784
 Amount of Each Receipt this Period 21542.20
 Memo Item
 TRANSFER
 TRANSFER OF JOINT FUNDRAISING PROCEEDS

C. BRELAND, LOUIS, W.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 269 E WATERS ST
 City ROSEMARY BEACH State FL Zip Code 32461-6908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRELAND HOMES LLC Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 07 / 2023**
Transaction ID : SA12.113785
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	21542.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 13
<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)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

A. BROADWAY, ROBERT, MARVIN, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 312 WILLIAMS AVE SE
 City HUNTSVILLE State AL Zip Code 35801-4248
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROADWAY GROUP Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 21 / 2023**
Transaction ID : SA12.113791
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

B. KEELON, ANDREW, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 CHALKSTONE ST NW
 City HUNTSVILLE State AL Zip Code 35806-5239
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DEVELOPER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt **04 / 06 / 2023**
Transaction ID : SA12.113790
 Amount of Each Receipt this Period 400.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

C. MANCE, AARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2101 GOVERNORS SW
 City HUNTSVILLE State AL Zip Code 35805-3853
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUCCESSUS LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 07 / 2023**
Transaction ID : SA12.113787
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 13
<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)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

A. MAPLES, CATHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 SIMMONS DRIVE
 City OWENS CROSS ROADS State AL Zip Code 35763-5706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R&D ELECTRONICS, INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 10 / 2023**
Transaction ID : SA12.113788
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

B. TAURENCE, BILL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22623 WEST RIVER ROAD
 City GROSE ILE State MI Zip Code 48138-1445
 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 ▼ 5000.00

Date of Receipt **04 / 06 / 2023**
Transaction ID : SA12.113789
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

C. WOLFE, R, WAYNE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 23143 FOUNDERS CIR
 City ATHENS State AL Zip Code 35613-8186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 07 / 2023**
Transaction ID : SA12.113786
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 JFC ATTRIB: STRONG VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	29101.82

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
SECURING THE REPUBLIC FOR OUR NEXT GENERATION

Full Name (Last, First, Middle Initial) A. CROSBY OTTENHOFF GROUP		Date of Disbursement MM / DD / YYYY 03 / 29 / 2023
Mailing Address 611 PENNSYLVANIA AVE SUITE 267		FEC Identification Number C [] Transaction ID : SB21B.I1083: Amount of Each Disbursement this Period 1120.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CROSBY OTTENHOFF GROUP		Date of Disbursement MM / DD / YYYY 06 / 21 / 2023
Mailing Address 611 PENNSYLVANIA AVE SUITE 267		FEC Identification Number C [] Transaction ID : SB21B.I10834 Amount of Each Disbursement this Period 1985.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3105.00
TOTAL This Period (last page this line number only).....▶	3105.00