

# 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

First for America

ADDRESS (number and street) 231 3rd St Unit 2

Check if different than previously reported. (ACC) Marietta OH 45750

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

C C00681478

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 checked="" 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 03 / 19 / 2024 in the State of OH

- (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 01 / 01 / 2024 through 02 / 28 / 2024

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 Locke, David, S, Mr.,

Signature of Treasurer Locke, David, S, Mr., Date 03 / 06 / 2024

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

First for America

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2024"/>  | <input type="text" value="1974.14"/>   | <input type="text" value="1974.14"/>   |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="1974.14"/>   |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="250000.00"/> | <input type="text" value="250000.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="251974.14"/> | <input type="text" value="251974.14"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="217000.00"/> | <input type="text" value="217000.00"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="34974.14"/>  | <input type="text" value="34974.14"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="150.00"/>    |  |

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

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

First for America

Report Covering the Period: From: 01 / 01 / 2024 To: 02 / 28 / 2024

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 250000.00                     | 250000.00                         |
| (ii) Unitemized .....   | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶   | 250000.00                     | 250000.00                         |
| (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) .....  | 250000.00                     | 250000.00                         |
| 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)).....▶                         | 250000.00                     | 250000.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶                                   | 250000.00                     | 250000.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditures (use Schedule E) .....  | 216000.00                     | 216000.00                         |
| 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).....                                 | 1000.00                       | 1000.00                           |
| 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)) ..      | 217000.00                     | 217000.00                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 217000.00                     | 217000.00                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

| <b>III. Net Contributions/<br/>Operating Expenditures</b>                            | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 250000.00                             | 250000.00                                 |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                                  | 0.00                                      |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 250000.00                             | 250000.00                                 |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 0.00                                  | 0.00                                      |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                                  | 0.00                                      |
| 38. Net Operating Expenditures<br>(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 11                 |
| (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             |                              |

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)  
**First for America**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Chamber of Commerce of the USA**

Mailing Address 1615 H St NW

|                    |             |                   |
|--------------------|-------------|-------------------|
| City<br>Washington | State<br>DC | Zip Code<br>20062 |
|--------------------|-------------|-------------------|

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 ▼  
250000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 23 / 2024

**Transaction ID : SA11AI.4252**

Amount of Each Receipt this Period  
250000.00

Memo Item  
Contribution

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

|  |           |
|--|-----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 250000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 250000.00 |

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input type="checkbox"/> 23  | <input type="checkbox"/> 26            | <input type="checkbox"/> 27  |
| <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input checked="" 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)  
**First for America**

**A. David Locke and Associates LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 231 3rd St Unit 2

City Marietta State OH Zip Code 45750

Purpose of Disbursement Tax Filing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2024

FEC Identification Number: C

Transaction ID : SB29.4254

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

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

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4099**  
**First for America**

|   |             |  |   |
|---|-------------|--|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Locke, David, S, Mr., |             | <input checked="" type="checkbox"/> N <input type="checkbox"/> Memo Item | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 515 Tupper St   |             |  |   |
| City<br>Marietta  | State<br>OH | ZIP Code<br>45750  |   |

|                                   |                                    |   |
|-----------------------------------|------------------------------------|---|
| Original Amount of Loan<br>100.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>100.00 |
|-----------------------------------|------------------------------------|---|

|              |   |  |                               |   |
|--------------|---|--|-------------------------------|---|
| <b>TERMS</b> | Date Incurred<br>MM / DD / YYYY<br>06 / 26 / 2018 | Date Due<br>MM / DD / YYYY<br>9/1/2018 | Interest Rate<br>5.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--------------|---|--|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
|--|------------------|----------|------------------------------------|
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |

|   |   |            |
|---|---|------------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | ▶ | [ ] 100.00 |
| <b>TOTALS</b> This Period (last page in this line only) ..... | ▶ | [ ]        |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



**SCHEDULE C (FEC Form 3X)**

**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4130**  
**First for America**

|   |             |                   |   |   |
|---|-------------|-------------------|---|---|
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Locke, David, S, Mr., |             |                   | <input checked="" type="checkbox"/> Memo Item | Election:<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 515 Tupper St   |             |                   |   |   |
| City<br>Marietta  | State<br>OH | ZIP Code<br>45750 |   |   |

|                                  |                                    |  |
|----------------------------------|------------------------------------|--|
| Original Amount of Loan<br>50.00 | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>50.00 |
|----------------------------------|------------------------------------|--|

**TERMS**

|   |  |                               |   |
|---|--|-------------------------------|---|
| Date Incurred<br>MM / DD / YYYY<br>11 / 19 / 2018 | Date Due<br>MM / DD / YYYY<br>12/31/2018 | Interest Rate<br>5.00 % (apr) | Secured:<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---|--|-------------------------------|---|

List All Endorsers or Guarantors (if any) to Loan Source

| 1. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
|--|------------------|----------|------------------------------------|
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |          |                                    |
| Mailing Address                            | Occupation       |          |                                    |
| City                                       | State            | ZIP Code | Amount Guaranteed Outstanding: [ ] |

|   |   |            |
|---|---|------------|
| <b>SUBTOTALS</b> This Period This Page (optional) .....       | ▶ | [ ] 50.00  |
| <b>TOTALS</b> This Period (last page in this line only) ..... | ▶ | [ ] 150.00 |

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
First for America
FEC IDENTIFICATION NUMBER
C C00681478

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CCI Memo Item
Mailing Address 203 Broadway East #337
City Granville State OH Zip Code 43023
Purpose of Expenditure Consulting Category/Type
Date of Public Distribution/Dissemination 02/28/2024
Amount 20000.00
Transaction ID : SE.4236
Date of Disbursement or Obligation 02/28/2024

Name of Federal Candidate: Kidd, Larry, , ,
Support Oppose
Office Sought: House Senate State: OH
District: 02
Calendar Year-To-Date Per Election for Office Sought 20000.00
Disbursement For: Primary General Other (specify)

Full Name of Payee CCI Memo Item
Mailing Address 203 Broadway East #337
City Granville State OH Zip Code 43023
Purpose of Expenditure Direct Mail Category/Type 004
Date of Public Distribution/Dissemination 02/28/2024
Amount 125000.00
Transaction ID : SE.4241
Date of Disbursement or Obligation 02/28/2024

Name of Federal Candidate: Kidd, Larry, , ,
Support Oppose
Office Sought: House Senate State: OH
District: 02
Calendar Year-To-Date Per Election for Office Sought 145000.00
Disbursement For: Primary General Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 145000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Locke, David, S, Mr.,
Signature

Date 03/06/2024

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
First for America
FEC IDENTIFICATION NUMBER
C C00681478

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee CCI
Mailing Address 203 Broadway East #337
City Granville State OH Zip Code 43023
Purpose of Expenditure OTT Advertising
Name of Federal Candidate: Kidd, Larry, , , Support
Office Sought: House District: 02 State: OH
Calendar Year-To-Date Per Election for Office Sought 205000.00
Disbursement For: Primary 2024

Full Name of Payee David Locke and Associates LLC
Mailing Address 231 3rd St Unit 2
City Marietta State OH Zip Code 45750
Purpose of Expenditure Reports Filings
Name of Federal Candidate: Kidd, Larry, , , Support
Office Sought: House District: 02 State: OH
Calendar Year-To-Date Per Election for Office Sought 216000.00
Disbursement For: Primary 2024

(a) SUBTOTAL of Itemized Independent Expenditures 71000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 216000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Locke, David, S, Mr.,
Signature

Date 03 / 06 / 2024