

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 Association of Insurance and Financial Advisors Political Action Comm

ADDRESS (number and street) 2901 Telestar Ct.
Check if different than previously reported. (ACC) Falls Church VA 22042

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00005249 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 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 05 / 01 / 2018 through 05 / 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.
Tassey, S., , Matthew,
Type or Print Name of Treasurer

Signature of Treasurer Tassey, S., , Matthew, [Electronically Filed] Date 08 / 19 / 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.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Comm

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="2018"/>		849494.75
(b) Cash on Hand at Beginning of Reporting Period.....	535866.75	
(c) Total Receipts (from Line 19)	103790.26	345283.66
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	639657.01	1194778.41
7. Total Disbursements (from Line 31).....	168517.00	723638.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	471140.01	471140.01
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

National Association of Insurance and Financial Advisors Political Action Comm

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).....	44450.42	109002.19
(ii) Unitemized	54339.84	221281.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	98790.26	330283.66
(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)	98790.26	330283.66
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.....	5000.00	15000.00
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)).....▶	103790.26	345283.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	103790.26	345283.66

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	102521.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	102521.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	168500.00	620300.00
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	17.00	817.00
(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)).....	17.00	817.00
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)) ..	168517.00	723638.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	168517.00	723638.40

DETAILED SUMMARY PAGE
of Disbursements

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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)	98790.26	330283.66
34. Total Contribution Refunds (from Line 28(d))	17.00	817.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	98773.26	329466.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	102521.40
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	102521.40

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

The June 20 Amendment is being filed in order to better clarify NAIFAPACs itemized and unitemized receipt totals. A \$45 and \$60 receipt originally showed as itemized. Now they are properly being counted in the unitemized totals. The Amendment shows the correct totals for the itemized and unitemized receipts.

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Stueck, James, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4767 Elderberry Ave

City Moorpark	State CA	Zip Code 93021-2453
------------------	-------------	------------------------

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

Name of Employer (for Individual) J.D. Stueck & Co.	Occupation (for Individual) Owner/Agent
--	--

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
05		02		2018

Transaction ID : 15478729

Amount of Each Receipt this Period
250.00

Memo Item

B. Anderson, Terry, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 412 South Main

City Brookings	State SD	Zip Code 57006-3145
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Anderson Insurance Associates	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
202.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2018

Transaction ID : 15478736

Amount of Each Receipt this Period
150.00

Memo Item

C. McGreevy-Lawler, Michaele, A., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 Penny Street

City Tea	State SD	Zip Code 57064-2322
-------------	-------------	------------------------

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

Name of Employer (for Individual) McGreevy & Associates	Occupation (for Individual) Insurance Agent
--	--

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
05		07		2018

Transaction ID : 15478769

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
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 8 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Lawler, John, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 401 Penny St

City Tea	State SD	Zip Code 57064-2322
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Ameritas	Occupation (for Individual) Insurance Agent
---	--

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
05		07		2018

Transaction ID : 15478771

Amount of Each Receipt this Period
250.00

Memo Item

B. Sievers, Calvin, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 North Berry Pine

City Rapid City	State SD	Zip Code 57702-1860
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Financial Associate
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2018

Transaction ID : 15478782

Amount of Each Receipt this Period
210.00

Memo Item

C. McKittrick, Kristin, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4020 Danley Drive

City Rapid City	State SD	Zip Code 57702-6893
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Mountain Plains Insurance	Occupation (for Individual) Owner/Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
486.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2018

Transaction ID : 15478784

Amount of Each Receipt this Period
361.25

Memo Item

SUBTOTAL of Receipts This Page (optional).....	821.25
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 9 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. West, Michael, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9131 Highland View Dr

City Kalamazoo	State MI	Zip Code 49009-7589
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) The West Agency	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2018

Transaction ID : 15478790

Amount of Each Receipt this Period
275.00

Memo Item

B. McNeely, Juli, Y., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address S764 Hanson Rd

City Spencer	State WI	Zip Code 54479-9579
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) McNeely Financial Services, Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
547.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2018

Transaction ID : 15478803

Amount of Each Receipt this Period
25.00

Memo Item

C. Nienhaus, Joseph, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N65 W34599 Whittaker Rd

City Oconomowoc	State WI	Zip Code 53066-5124
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Woodbury Financial	Occupation (for Individual) Vice_President
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2018

Transaction ID : 15478826

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 10 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Lindsley, Heather, L., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2251 Warm Springs Ct

City Green Bay	State WI	Zip Code 54311-5032
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Woodmen Financial Resources	Occupation (for Individual) Registered Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
652.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2018

Transaction ID : 15478828

Amount of Each Receipt this Period
25.00

Memo Item

B. DeRouin, Brendon, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8858 Nessa Rd

City Belleville	State WI	Zip Code 53508
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Insurance Services Group, Inc	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
537.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2018

Transaction ID : 15478830

Amount of Each Receipt this Period
25.00

Memo Item

C. Tassej, Matthew, S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 Reggio Ave

City Old Orchard Beach	State ME	Zip Code 04064-2709
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) E A Scribner Insurance Agency	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15478843

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	155.00
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 11 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Edwards, David, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 30 W. Granada Avenue

City Hershey	State PA	Zip Code 17033-1440
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) David M. Edwards & Associates Financia	Occupation (for Individual) President
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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
05		10		2018

Transaction ID : 15478862

Amount of Each Receipt this Period
50.00

Memo Item

B. Scritchfield, Randy, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10105 Nightingale St

City Gaithersburg	State MD	Zip Code 20882-4019
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Montgomery Financial Group, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15478864

Amount of Each Receipt this Period
105.00

Memo Item

C. Bennett, Kent, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 280 Hollow Rd

City Muncy	State PA	Zip Code 17756-5789
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Kent A. Bennett & Associates, Inc.	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15478866

Amount of Each Receipt this Period
87.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	242.50
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 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Schwendeman, Mark, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 427 4th St
 City Marietta State OH Zip Code 45750-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Schwendeman Agency, Inc. Occupation (for Individual) PRESIDENT/OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478888
 Amount of Each Receipt this Period 60.00
 Memo Item

B. Lounds, Lawrence, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2477 Valley Oaks Circle
 City Flint State MI Zip Code 48532-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Security 1st Benefits Corporation Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478897
 Amount of Each Receipt this Period 105.00
 Memo Item

C. Schleicher, Donald, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W7167 Glen Valley Dr
 City Greenville State WI Zip Code 54942-8108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lifetime Retirement Planning, Inc. Occupation (for Individual) President/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478901
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
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 13 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Brown, Charles, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3632 Petersburg Rd.

City Burlington	State KY	Zip Code 41005-8776
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Charles Brown CLU & Company	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15478906

Amount of Each Receipt this Period
105.00

Memo Item

B. Nelson, Robert, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14712 Shirley Street

City Omaha	State NE	Zip Code 68144-2144
---------------	-------------	------------------------

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

Name of Employer (for Individual) Nelson Murphy Insurance & Investments,	Occupation (for Individual) Managing Partner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15478927

Amount of Each Receipt this Period
210.00

Memo Item

C. Phares, Brian, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1420 Hackberry Road

City North Platte	State NE	Zip Code 69101-6841
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Phares Financial Services	Occupation (for Individual) Vice President
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15478936

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	390.00
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 14 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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)
National Association of Insurance and Financial Advisors Political Action Comm

A. Hansen, Karl, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2068 Cynthia Way
 City Los Altos State CA Zip Code 94024-7274
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Vita Companies Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478954
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Curtis, Jack, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 Morning Glory Cr.
 City Tupelo State MS Zip Code 38801-8446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Jack Curtis Agency Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478968
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Warren, Mark, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 S. Holliday Street
 City Plainview State TX Zip Code 79072-9568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Higginbotham Agencies Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15478976
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	292.00
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 15 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Laster, Thomas, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1713 Elmhurst Ave

City Nichols Hills	State OK	Zip Code 73120-1011
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Rogers Benefit Group	Occupation (for Individual) Regional Representative
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15478993

Amount of Each Receipt this Period
50.40

Memo Item

B. Nolimal, Frank, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Vita Fresco Court

City Henderson	State NV	Zip Code 89011-3156
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Assurance Ltd	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479012

Amount of Each Receipt this Period
126.00

Memo Item

C. Hamilton, Edwin, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4318 Council Circle

City Jackson	State MS	Zip Code 39206-5819
-----------------	-------------	------------------------

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

Name of Employer (for Individual) American General	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479035

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	218.40
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 16 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Smith, Ray, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 N Crescent Dr.

City Stillwater	State OK	Zip Code 74075-2603
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Ray Smith Wealth Management	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15479061

Amount of Each Receipt this Period
45.00

Memo Item

B. Rake, Barry, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1004 Dawne Dr

City Williamsport	State PA	Zip Code 17701-9767
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Kent A. Bennett & Associates	Occupation (for Individual) AGENT
---	--------------------------------------

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
05	/	10	/	2018

Transaction ID : 15479064

Amount of Each Receipt this Period
50.00

Memo Item

C. Hare, Paul, Deshazo, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 904 Potts Chapel Rd

City Jackson	State TN	Zip Code 38305-9278
-----------------	-------------	------------------------

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

Name of Employer (for Individual) The Hare Financial Group	Occupation (for Individual) Career Agent
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15479065

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	140.00
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 17 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Stimmel, Michael, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3210 Hwy 1 SW

City Iowa City	State IA	Zip Code 52240-8585
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Financial Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479118

Amount of Each Receipt this Period
126.00

Memo Item

B. Allbright, Joe, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 Capistrano CT

City Odessa	State TX	Zip Code 79765-8517
----------------	-------------	------------------------

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

Name of Employer (for Individual) Farmers Insurance Group	Occupation (for Individual) Agency Owner
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479136

Amount of Each Receipt this Period
500.00

Memo Item

C. Holz, Bryon, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 Cindy Ln

City Brandon	State FL	Zip Code 33510-3905
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Bryon Holz & Associates	Occupation (for Individual) Independent Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
518.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479160

Amount of Each Receipt this Period
104.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	730.50
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 18 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Wimsatt, Randall, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4400 Hannon Dr.

City Farmington	State NM	Zip Code 87402-8718
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Randy Wimsatt Agency, Inc.	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479167

Amount of Each Receipt this Period
60.00

Memo Item

B. D'Addona, Vincent, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 341 Harbor Dr

City Lido Beach	State NY	Zip Code 11561-4906
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Strategies for Wealth	Occupation (for Individual) General Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
833.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479196

Amount of Each Receipt this Period
208.33

Memo Item

C. Davidson, John, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11325 Raes Creek Rd.

City Moorpark	State CA	Zip Code 93021-2250
------------------	-------------	------------------------

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

Name of Employer (for Individual) Davidson Insurance & Financial Service	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479209

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	373.33
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 19 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Massey, Douglas, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. Box 60707
 City San Angelo State TX Zip Code 76906-0707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Doug Massey Financial Services Occupation (for Individual) Agent/Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479225
 Amount of Each Receipt this Period 140.00
 Memo Item

B. Henderson, Marcus, T., Mr., Sr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 Barrington Ct E
 City Franklin State TN Zip Code 37067-5003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Henderson Financial Group, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479236
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Stratton, David, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13115 Beach Cir
 City Anchorage State AK Zip Code 99515-3748
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Stratton Financial Management Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1664.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479270
 Amount of Each Receipt this Period 416.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	631.00
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 20 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Estler, Stephen, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2177 NE 63 St.

City Fort Lauderdale	State FL	Zip Code 33308-1330
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Estler Financial	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
834.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479294

Amount of Each Receipt this Period
208.50

Memo Item

B. Brown, Michael, O., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6512 NE 113th St

City Edmond	State OK	Zip Code 73013-8351
----------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479299

Amount of Each Receipt this Period
126.00

Memo Item

C. Dolinak, Steven, Thomas, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2241 Lyons Bend Dr

City Knoxville	State TN	Zip Code 37919-8931
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Capital Fin. Group, LLC	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479304

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	418.50
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 21 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Potts, Charles, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12725 Saint Andrews Ter

City Oklahoma City	State OK	Zip Code 73120-8807
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) Agent/Broker
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479308

Amount of Each Receipt this Period
51.00

Memo Item

B. Clark, Thomas, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 - 39th Street

City West Des Moines	State IA	Zip Code 50265-3931
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Compensation Designs, LLC	Occupation (for Individual) General Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479314

Amount of Each Receipt this Period
60.00

Memo Item

C. Erstad, Byron, Hyatt, Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2510 S Nantucket Way

City Boise	State ID	Zip Code 83706-5095
---------------	-------------	------------------------

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

Name of Employer (for Individual) Erstad & Company	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479316

Amount of Each Receipt this Period
90.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	201.00
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 22 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Fortenberry, H., Larry, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Northshore Pt
 City Madison State MS Zip Code 39110-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Executive Planning Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479397
 Amount of Each Receipt this Period 105.00
 Memo Item

B. Mulqueen, Kevin, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 41 Silo Lane
 City Middletown State NY Zip Code 10940-2603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York Life Occupation (for Individual) Registered Rep.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479413
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Miller, Robert, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10530 Savannah Drive
 City Vero Beach State FL Zip Code 32963-6324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Miller-Pomerantz Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479416
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	647.00
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 23 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Fulton, Donald, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1269 Madison Lane

City Hockessin	State DE	Zip Code 19707-9418
-------------------	-------------	------------------------

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

Name of Employer (for Individual) George J. Weiner Associates, LLP.	Occupation (for Individual) Managing_Partner
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479421

Amount of Each Receipt this Period
75.00

Memo Item

B. Kuehl, Lanny, N., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 202 N Homestead Street

City Garnavillo	State IA	Zip Code 52049-8099
--------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479460

Amount of Each Receipt this Period
60.00

Memo Item

C. Specht, Kenneth, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7606 28th Avenue

City Kenosha	State WI	Zip Code 53143-5659
-----------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479491

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	177.00
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 24 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Miller, Anthony, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4502 Hi Line Drive
 City Billings State MT Zip Code 59106-4703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retirement Solutions Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479508
 Amount of Each Receipt this Period 84.00
 Memo Item

B. Telge, Gregory, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1655 North River Road
 City Manchester State NH Zip Code 03104-1645
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479512
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Barnes, Mitchell, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8216 Limehouse Ln
 City Louisville State KY Zip Code 40220-3833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Wealth Management Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479522
 Amount of Each Receipt this Period 50.40
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	176.40
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 25 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Roach, Robert, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2390 Kensington Drive

City Columbus	State OH	Zip Code 43221-3770
------------------	-------------	------------------------

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

Name of Employer (for Individual) NMFN - Kemelgor Financial Group	Occupation (for Individual) Wealth Management Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479529

Amount of Each Receipt this Period
225.00

Memo Item

B. DeGolier, Laura, P., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 S Main St
Pmb 301

City Fond Du Lac	State WI	Zip Code 54935-4229
---------------------	-------------	------------------------

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

Name of Employer (for Individual) DeGolier Insurance Services, LLC	Occupation (for Individual) Agency_Owner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
412.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479539

Amount of Each Receipt this Period
50.00

Memo Item

C. Burry, Garry, S., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 622 Woodlake Dr

City Louisville	State KY	Zip Code 40245-5121
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Estate and Business Planning Advisor
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479540

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
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 26 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Kaltenbach, Terry, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1358 Ahlrich Ave
 City Encintas State CA Zip Code 92024-4029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kbach Associates Insurance Services Occupation (for Individual) President/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479584
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Winkelhake, Larry, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3540 County Road C
 City West Bend State WI Zip Code 53095-9242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Financial Group Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479597
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Eddy, Robert, , Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 Autumn Oak Bnd
 City Lafayette State LA Zip Code 70508-8004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prudential Financial DBA - Pinnacle Gr Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15479631
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	227.00
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 140 (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 Association of Insurance and Financial Advisors Political Action Comm

A. Gaeta, Michael, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5520 Reynolds Avenue
 City Muscatine State IA Zip Code 52761-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prudential Financial Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15479635
 Amount of Each Receipt this Period
 51.00
 Memo Item

B. Hasse, George, W., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3728 Deer Flats St
 City Las Vegas State NV Zip Code 89129-7042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prudential Financial Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15479637
 Amount of Each Receipt this Period
 60.00
 Memo Item

C. Kaufmann, Randall, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 356 Equus Drive
 City Camp Hill State PA Zip Code 17011-8357
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kaufmann & Associates, LLC Occupation (for Individual) Special Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15479645
 Amount of Each Receipt this Period
 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	171.00
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 28 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Johns, John, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5141 Lilly Rd.

City Hazlehurst	State MS	Zip Code 39083-9490
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Southern Farm Bureau Life Insurance	Occupation (for Individual) Agency_Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479667

Amount of Each Receipt this Period
210.00

Memo Item

B. Rust, Daniel, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 W Arnold St

City Bozeman	State MT	Zip Code 59715-6129
-----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479706

Amount of Each Receipt this Period
75.00

Memo Item

C. Hagemann, Paul, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19800 SW Tile Flat Rd

City Beaverton	State OR	Zip Code 97007-8700
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479715

Amount of Each Receipt this Period
68.75

Memo Item

SUBTOTAL of Receipts This Page (optional).....	353.75
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 29 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Robertson, Randy, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7816 Harvest Hill Ln

City McKinney	State TX	Zip Code 75071-7649
------------------	-------------	------------------------

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

Name of Employer (for Individual) Robertson-Wolfe	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479734

Amount of Each Receipt this Period
65.00

Memo Item

B. Ostrove, Mitchell, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 232 Norman Road

City New Rochelle	State NY	Zip Code 10804-3114
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Ameritas	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479749

Amount of Each Receipt this Period
84.00

Memo Item

C. Moran, Timothy, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1863 Brooksedge Drive

City Germantown	State TN	Zip Code 38138-2737
--------------------	-------------	------------------------

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

Name of Employer (for Individual) UCL Financial Group, LLC	Occupation (for Individual) Investment_Representative
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479751

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	174.00
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 30 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Koll, David, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1612 S. 152nd Street

City Omaha	State NE	Zip Code 68144-5121
---------------	-------------	------------------------

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

Name of Employer (for Individual) Mutual of Omaha	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
627.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479755

Amount of Each Receipt this Period
105.00

Memo Item

B. Koppa, David, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1105 Via Bolzano

City Santa Barbara	State CA	Zip Code 93111-1053
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Cornerstone Insurance Services	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
222.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479774

Amount of Each Receipt this Period
55.50

Memo Item

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

Mailing Address 1045 Warwick Ave
Suite 104

City Warwick	State RI	Zip Code 02888-3657
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Leonard Martin & Associates Inc	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479829

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	244.50
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 31 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Isaac, C., David, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1705 Timber Valley Ct

City Kokomo	State IN	Zip Code 46902-5097
----------------	-------------	------------------------

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

Name of Employer (for Individual) David Isaac & Associates	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479879

Amount of Each Receipt this Period
100.00

Memo Item

B. McNeely, Juli, Y., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address S764 Hanson Rd

City Spencer	State WI	Zip Code 54479-9579
-----------------	-------------	------------------------

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

Name of Employer (for Individual) McNeely Financial Services, Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
697.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479948

Amount of Each Receipt this Period
150.00

Memo Item

C. Kneeland, John, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 926 Boyson Rd NE

City Cedar Rapids	State IA	Zip Code 52402-7352
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Collective Financial Group	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479963

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
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 32 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Miller, Richard, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1214 Karr Ave.

City Yakima	State WA	Zip Code 98902-5026
----------------	-------------	------------------------

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

Name of Employer (for Individual) Richard L. Miller	Occupation (for Individual) Financial Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479965

Amount of Each Receipt this Period
87.50

Memo Item

B. Flynn, Sherry, K., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 Road 5151

City Bloomfield	State NM	Zip Code 87413-9700
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Flynn Financial Services	Occupation (for Individual) Investment Advisor Representative
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15479979

Amount of Each Receipt this Period
51.00

Memo Item

C. Berg, Robert, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1405 Blackberry Lane

City Stevens Point	State WI	Zip Code 54481-9140
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) Planning Concepts Inc.	Occupation (for Individual) Sales Representative
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480045

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	188.50
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 33 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Gallacher, Kenneth, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1500 Rawhide

City Henderson	State NV	Zip Code 89002-8814
-------------------	-------------	------------------------

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

Name of Employer (for Individual) American National Insurance Company	Occupation (for Individual) Regional Director
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480056

Amount of Each Receipt this Period
50.40

Memo Item

B. Andersen, Stephen, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1621 Dixie Trail

City Lincoln	State NE	Zip Code 68527-9431
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Midlands Financial	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480080

Amount of Each Receipt this Period
42.00

Memo Item

C. Denny, James, R., Mr., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8707 Standish Ln.

City Richmond	State VA	Zip Code 23229-7922
------------------	-------------	------------------------

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

Name of Employer (for Individual) AXA Advisors, LLC	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480132

Amount of Each Receipt this Period
112.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	204.90
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 34 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Haeuser, LeRoy, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12589 N. Wauwatosa Road

City Mequon	State WI	Zip Code 53097-2713
----------------	-------------	------------------------

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

Name of Employer (for Individual) LeRoy C. Haeuser Agency	Occupation (for Individual) Agency_Owner
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
237.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480161

Amount of Each Receipt this Period
50.00

Memo Item

B. Grimes, Gregory, Lynn, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4404 Ryefield Ct

City Columbia	State MO	Zip Code 65203-6495
------------------	-------------	------------------------

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

Name of Employer (for Individual) Financial Resource Group, LLC	Occupation (for Individual) Financial_Planner
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480198

Amount of Each Receipt this Period
67.50

Memo Item

C. Bell, Kevin, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 318 W Greyhound Pass

City Carmel	State IN	Zip Code 46032-7007
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Guardian	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480212

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	242.50
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 35 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Kane, Joseph, J., Mr.,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>10</td> <td>/</td> <td>2018</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	10	/	2018
M M M	/	D D D	/	Y Y Y Y Y Y									
05	/	10	/	2018									
Mailing Address 12700 Park Central Dr. Suite 1050			Transaction ID : 15480218										
City Dallas	State TX	Zip Code 75251-1538	Amount of Each Receipt this Period <table border="1"> <tr> <td>42.00</td> </tr> </table>	42.00									
42.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item										
Name of Employer (for Individual) Personal Economics Group		Occupation (for Individual) General Agent											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>210.00</td> </tr> </table>	210.00										
210.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Birdwell, William, Clay, Mr.,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>10</td> <td>/</td> <td>2018</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	10	/	2018
M M M	/	D D D	/	Y Y Y Y Y Y									
05	/	10	/	2018									
Mailing Address 213 Cherokee Rd.			Transaction ID : 15480220										
City Nashville	State TN	Zip Code 37205-1817	Amount of Each Receipt this Period <table border="1"> <tr> <td>70.00</td> </tr> </table>	70.00									
70.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item										
Name of Employer (for Individual) Baker Birdwell, LLC		Occupation (for Individual) OWNER											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>210.00</td> </tr> </table>	210.00										
210.00													

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Dinsmore, James, J., Mr.,			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>05</td> <td>/</td> <td>10</td> <td>/</td> <td>2018</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	05	/	10	/	2018
M M M	/	D D D	/	Y Y Y Y Y Y									
05	/	10	/	2018									
Mailing Address 104 Lehman Drive			Transaction ID : 15480263										
City Cogan Station	State PA	Zip Code 17728-9228	Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00									
50.00													
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item										
Name of Employer (for Individual) Liberty Mutual Insurance Co		Occupation (for Individual) Exec. Sales Rep.											
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>	250.00										
250.00													

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>162.00</td> </tr> </table>	162.00
162.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 36 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Acuna, Sergio, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1656 Bob Murphy Drive
 City El Paso State TX Zip Code 79936-5206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lincoln Financial Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480309
 Amount of Each Receipt this Period
 60.00
 Memo Item

B. Duren, Daniel, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2348 Andrea Place
 City Lincoln State NE Zip Code 68512-9415
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Benefit Management Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480353
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Marrazzo, Joseph, G., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 S. Arlington Ave.
 City Harrisburg State PA Zip Code 17109-4202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marrazzo and Associates Financial Grou Occupation (for Individual) President
 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
 05 / 10 / 2018
Transaction ID : 15480389
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 37 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Knake, Casey, C., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2902 Mach I Dr.
 City Norfolk State NE Zip Code 68701-3238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Heritage Financial Services, LLC Occupation (for Individual) Investment Specialist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15480400
 Amount of Each Receipt this Period 84.00
 Memo Item

B. Lawrence, Daniel, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5553 Peters Drive
 City West Bend State WI Zip Code 53095-8301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Modern Woodmen of America Occupation (for Individual) Agency Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15480402
 Amount of Each Receipt this Period 70.00
 Memo Item

C. Milburn, Michael, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2332 Flagstaff Dr.
 City Longmont State CO Zip Code 80504-9282
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mutual of Omaha Companies Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15480430
 Amount of Each Receipt this Period 45.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	199.00
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 38 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Gray, Michael, William, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4401 NW Honeysuckle
 City Corvallis State OR Zip Code 97330-3356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwest Financial Group, LLC Occupation (for Individual) Managing Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480469
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Corrente, Gregory, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 8332
 City Metairie State LA Zip Code 70011-8332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Corrente & Associates Occupation (for Individual) Agent/Broker
 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
 05 / 10 / 2018
Transaction ID : 15480488
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Eskew, Curtis, Lowell, Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1680 Keely Lane
 City Sarasota State FL Zip Code 34232-3061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York Life Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480506
 Amount of Each Receipt this Period 84.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	176.00
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 39 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Enders, Kap-Sun, C., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11569 Discovery View

City Anchorage	State AK	Zip Code 99515-2752
-------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480535

Amount of Each Receipt this Period
75.00

Memo Item

B. Johnson, Rodger, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 910 N Houston Street

City Bullard	State TX	Zip Code 75757-5128
-----------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480542

Amount of Each Receipt this Period
84.00

Memo Item

C. Grantham, Todd, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 Montcrest Dr

City Durham	State NC	Zip Code 27713-8136
----------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual Financial Network	Occupation (for Individual) Financial Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2080.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480572

Amount of Each Receipt this Period
416.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	575.00
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 40 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Goodrich, James, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1860 Beech

City Mt. Pleasant	State MI	Zip Code 48858-1280
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480583

Amount of Each Receipt this Period
105.00

Memo Item

B. Begneaud, Kenneth, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 Silverbell Pwky

City Lafayette	State LA	Zip Code 70508-4130
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Financial Representative
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480590

Amount of Each Receipt this Period
45.00

Memo Item

C. Frost, Donald, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 612 N Pageant Dr #A

City Orange	State CA	Zip Code 92869-2572
----------------	-------------	------------------------

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

Name of Employer (for Individual) Don Frost Insurance Agency, Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480627

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	192.00
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 41 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Delp, Barry, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2616 Sheffield Dr
 City Davenport State IA Zip Code 52806-2619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ozark National Life Insurance Company Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 216.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480635
 Amount of Each Receipt this Period
 54.00
 Memo Item

B. Blaylock, Eleanor, B., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9439 Gay Ln
 City Oil City State LA Zip Code 71061-9705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Burke & Burke Insurance Marketing, Inc Occupation (for Individual) Agency Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15480639
 Amount of Each Receipt this Period
 112.50
 Memo Item

C. Hampton, James, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3601 North Classen #201a
 City Oklahoma City State OK Zip Code 73118-3231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Birchall & Hampton Occupation (for Individual) Insurance Agent
 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
 05 / 10 / 2018
Transaction ID : 15480646
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	216.50
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 42 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Headley, Terry, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20704 Meadow Ridge Drive

City Springfield	State NE	Zip Code 68059-7086
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Headley Financial Group	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480680

Amount of Each Receipt this Period
400.00

Memo Item

B. Bardin, James, T., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4226 Fairway Circle

City Tampa	State FL	Zip Code 33618-8640
---------------	-------------	------------------------

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

Name of Employer (for Individual) Principal	Occupation (for Individual) Financial Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480682

Amount of Each Receipt this Period
45.00

Memo Item

C. Dickey, Therese, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 21078

City Billings	State MT	Zip Code 59104-1078
------------------	-------------	------------------------

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

Name of Employer (for Individual) PayneWest Insurance	Occupation (for Individual) Account 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
05		10		2018

Transaction ID : 15480686

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	495.00
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 43 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Daigle, Gregory, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 Tortola Lane

City Youngsville	State LA	Zip Code 70592-5760
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Pinnacle Group	Occupation (for Individual) Financial Advisor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
465.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480715

Amount of Each Receipt this Period
85.00

Memo Item

B. Gartner, Lori, A., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3407 4th Ave.

City Kearney	State NE	Zip Code 68845-2823
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Wells Fargo Advisors, LLC	Occupation (for Individual) Associate Vice President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480717

Amount of Each Receipt this Period
42.00

Memo Item

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

Mailing Address 17 Grove St

City Lewiston	State ME	Zip Code 04240-3425
------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Lisa Laliberte
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480757

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	202.00
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 44 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Mason, Catherine, L., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6444 Kome Drive

City Diamondhead	State MS	Zip Code 39525-3816
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

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
05	/	10	/	2018

Transaction ID : 15480805

Amount of Each Receipt this Period
50.00

Memo Item

B. Bell, Daniel, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P. O. Box 1747

City Cleveland	State MS	Zip Code 38732-1747
-------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) AGENT
---	--------------------------------------

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
05	/	10	/	2018

Transaction ID : 15480835

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 1630 Prairie Dunes Drive

City Collierville	State TN	Zip Code 38017-4158
----------------------	-------------	------------------------

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

Name of Employer (for Individual) UCL Financial Group	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15480871

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	142.00
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 45 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Brown, C., Robert, Mr., Sr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8675 Westcott Dr

City Germantown	State TN	Zip Code 38138-7738
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480879

Amount of Each Receipt this Period
165.00

Memo Item

B. Anderson, Terry, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 412 South Main

City Brookings	State SD	Zip Code 57006-3145
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Anderson Insurance Associates	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480911

Amount of Each Receipt this Period
17.50

Memo Item

C. Roberts, Joseph, K., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7848 Creek View Dr

City Lincoln	State NE	Zip Code 68516-3843
-----------------	-------------	------------------------

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

Name of Employer (for Individual) UNICO Midlands	Occupation (for Individual) Vice President
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15480996

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	227.50
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 46 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Olson, Mark, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7005 Daugherty St.

City Austin	State TX	Zip Code 78757-2115
----------------	-------------	------------------------

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

Name of Employer (for Individual) Horizon Wealth Strategies, LLC	Occupation (for Individual) Financial Planner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481001

Amount of Each Receipt this Period
60.00

Memo Item

B. Silbernagel, James, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N2248 State Road 67

City Campbellsport	State WI	Zip Code 53010-2933
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) The Silbernagel Group Inc.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481003

Amount of Each Receipt this Period
25.00

Memo Item

C. Silbernagel, James, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N2248 State Road 67

City Campbellsport	State WI	Zip Code 53010-2933
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) The Silbernagel Group Inc.	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481005

Amount of Each Receipt this Period
225.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.00
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 47 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Printy, Dennis, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 603 Columbus Ave, Ste C
 PO Box 395
 City Sandusky State OH Zip Code 44870-2756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Schaefer Printy Associates Occupation (for Individual) Brokerage Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 202.50

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481036
 Amount of Each Receipt this Period 45.00
 Memo Item

B. Murphy, Michael, G., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2041 S 88 St
 City Omaha State NE Zip Code 68124-2111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nelson Murphy Insurance & Investments, Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481126
 Amount of Each Receipt this Period 84.00
 Memo Item

C. Toscano, Gregory, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Snelling Ave
 City Duluth State MN Zip Code 55812-1158
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Johnson Insurance Consultants Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481133
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	234.00
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 48 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Pierce, A., Duer, Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 Snuff Mill Road
 City Wilmington State DE Zip Code 19807-1043
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Financial House Occupation (for Individual) Insurance Agent
 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
 05 / 10 / 2018
Transaction ID : 15481141
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Wheeler, John, W., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1075 Aster Ln
 City West Chicago State IL Zip Code 60185-1750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Water Tower Financial Partners, LLC Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1045.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15481155
 Amount of Each Receipt this Period
 209.00
 Memo Item

C. Young, Tallie, O., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6318 Falcon Crest Court
 City Sachse State TX Zip Code 75048-3539
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tallie O Young & Associates Occupation (for Individual) Investment Advisor Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15481167
 Amount of Each Receipt this Period
 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	309.00
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 49 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Robb, Jon, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 214 Atlantic Dr.

City Vernon Hills	State IL	Zip Code 60061-2029
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Farmers Insurance Group	Occupation (for Individual) District Manager
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481189

Amount of Each Receipt this Period
42.00

Memo Item

B. Owens, Roger, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 Landing Lane

City Elkton	State MD	Zip Code 21921-5204
----------------	-------------	------------------------

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

Name of Employer (for Individual) Rymark Financial Services	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481202

Amount of Each Receipt this Period
75.00

Memo Item

C. Saunders, Michael, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4560 Ortega Blvd

City Jacksonville	State FL	Zip Code 32210-6043
----------------------	-------------	------------------------

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

Name of Employer (for Individual) Saunders & Co.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481233

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	159.00
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 50 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Saladino, Steven, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16507 Silverhill Dr
 City Tampa State FL Zip Code 33624-1214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 1050.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481314
 Amount of Each Receipt this Period 210.00
 Memo Item

B. Schaeffer, Gregory, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3627 - 22nd St.
 City Kenosha State WI Zip Code 53144-1443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Schaeffer Financial Group LLC Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 225.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481363
 Amount of Each Receipt this Period 45.00
 Memo Item

C. Shalek, James, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 Candleberry Lane
 City Yorkville State IL Zip Code 60560-5810
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Financial Group Occupation (for Individual) Senior Financial Representative
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date 300.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481485
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
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 51 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Russell, David, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8461 Eagle Preserve Way

City Sarasota	State FL	Zip Code 34241-9449
------------------	-------------	------------------------

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

Name of Employer (for Individual) Rogers Benefit Group	Occupation (for Individual) Regional Mgr.
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481488

Amount of Each Receipt this Period
105.00

Memo Item

B. Simonis, Alan, F., Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2707 Arite Stree SW
Suite 12

City Huntsville	State AL	Zip Code 35805-4769
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Protective Life	Occupation (for Individual) Manager
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481492

Amount of Each Receipt this Period
42.00

Memo Item

C. Struebing, Michael, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16112 Parker St

City Omaha	State NE	Zip Code 68118-2429
---------------	-------------	------------------------

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

Name of Employer (for Individual) Headley Financial Group	Occupation (for Individual) Representative
--	---

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
05		10		2018

Transaction ID : 15481551

Amount of Each Receipt this Period
62.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	209.50
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 52 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Wilson, Cliff, F., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1458 W Bahia Ct

City Gilbert	State AZ	Zip Code 85233-5600
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Southeast Arizona Insurance Services,	Occupation (for Individual) General Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481642

Amount of Each Receipt this Period
126.00

Memo Item

B. Wilson, Cassandra, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3909 Patty Ln

City Bethany	State OK	Zip Code 73008-3046
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
288.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481772

Amount of Each Receipt this Period
72.00

Memo Item

C. Dougherty, Paul, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10709 Croom Road

City Upper Marlboro	State MD	Zip Code 20772-8406
------------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481819

Amount of Each Receipt this Period
112.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	310.50
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 53 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Carr, Roderick, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1283 S Gosling Way
 City Eagle State ID Zip Code 83616-6326
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) New York Life Occupation (for Individual) Registered Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481859
 Amount of Each Receipt this Period 51.00
 Memo Item

B. Golleher, Connie, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20910 Beallsville Road
 City Dickerson State MD Zip Code 20842-9072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Golleher Group Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 204.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481909
 Amount of Each Receipt this Period 51.00
 Memo Item

C. Kruse, Randy, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1610 E 8th St
 City Sheldon State IA Zip Code 51201-1825
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farm Bureau Occupation (for Individual) Agent/Broker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 432.00

Date of Receipt 05 / 10 / 2018
Transaction ID : 15481913
 Amount of Each Receipt this Period 126.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	228.00
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 54 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Calles, John, Elias, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 650 University Drive

City Coral Gables	State FL	Zip Code 33134-7060
----------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481917

Amount of Each Receipt this Period
45.00

Memo Item

B. Johnson, Larry, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 44466 Albert

City Plymouth	State MI	Zip Code 48170-3902
------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Ins Co	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481941

Amount of Each Receipt this Period
70.00

Memo Item

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

Mailing Address 7812 Tripp Ave

City Amarillo	State TX	Zip Code 79121-1726
------------------	-------------	------------------------

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

Name of Employer (for Individual) Safe Money Solutions Group	Occupation (for Individual) Owner/Senior Producer
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
385.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15481956

Amount of Each Receipt this Period
115.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
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 55 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Tapscott, Brad, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 523 Castle Hall Rd

City Mount Pleasant	State SC	Zip Code 29464-6231
------------------------	-------------	------------------------

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

Name of Employer (for Individual) Ameriprise Financial Services, Inc.	Occupation (for Individual) Certified Financial Planner Practition
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15481969

Amount of Each Receipt this Period
75.00

Memo Item

B. Hartman, Gerald, G., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3822 Gemini Cir

City Boise	State ID	Zip Code 83709-4834
---------------	-------------	------------------------

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

Name of Employer (for Individual) Insurance Network America	Occupation (for Individual) Chairman & CEO
--	---

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
05		10		2018

Transaction ID : 15481974

Amount of Each Receipt this Period
50.00

Memo Item

C. Wiskus, Mark, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 Edgewater Drive

City Pella	State IA	Zip Code 50219-7669
---------------	-------------	------------------------

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

Name of Employer (for Individual) Wiskus Group	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482006

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
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 56 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Hely, Edward, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4041 Valley Rd

City Paducah	State KY	Zip Code 42001-4777
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Investment Specialist
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482045

Amount of Each Receipt this Period
50.40

Memo Item

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

Mailing Address 10972 W Reutzel Dr

City Boise	State ID	Zip Code 83709-5032
---------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Idaho	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482051

Amount of Each Receipt this Period
51.00

Memo Item

C. Bosch, Ryan, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 South 19th St. Ct.

City Marion	State IA	Zip Code 52302-4144
----------------	-------------	------------------------

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

Name of Employer (for Individual) Bosch Financial	Occupation (for Individual) Financial Advisor
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482063

Amount of Each Receipt this Period
51.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	152.40
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 57 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Morton, Joseph, L., Mr., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5487 N Bach

City Meridian	State ID	Zip Code 83646-4711
------------------	-------------	------------------------

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

Name of Employer (for Individual) Intermountain Legal Group	Occupation (for Individual) Attorney At Law
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482124

Amount of Each Receipt this Period
126.00

Memo Item

B. Kloke, Neal, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1241 St. Paul Street

City Bellingham	State WA	Zip Code 98229-2124
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Kloke Financial Services, Inc.	Occupation (for Individual) Investment Advisor Representative
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482128

Amount of Each Receipt this Period
105.00

Memo Item

C. Sievers, Calvin, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 North Berry Pine

City Rapid City	State SD	Zip Code 57702-1860
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Financial Associate
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482153

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	261.00
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 58 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Daniel, Roger, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 N 30th, #3D

City Billings	State MT	Zip Code 59101-1161
------------------	-------------	------------------------

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

Name of Employer (for Individual) Roger L. Daniel Insurance Agency, Inc.	Occupation (for Individual) AGENT
---	--------------------------------------

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
05		10		2018

Transaction ID : 15482287

Amount of Each Receipt this Period
50.00

Memo Item

B. Kessel, Patrick, Alex, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 E Harrison Ave

City Fairfield	State IA	Zip Code 52556-3836
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Farm Bureau Fin. Services	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482289

Amount of Each Receipt this Period
126.00

Memo Item

C. Flint, Sherry, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 456 Arden Dr.
230

City Encinitas	State CA	Zip Code 92024-4559
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Principal Financial	Occupation (for Individual) RVP - Life
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482300

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	218.00
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 59 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Markham, Jesse, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 Hooulu St

City Kailua	State HI	Zip Code 96734-2238
----------------	-------------	------------------------

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

Name of Employer (for Individual) Aja Benefits Consultants dba Markham I	Occupation (for Individual) Managing Partner
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482306

Amount of Each Receipt this Period
55.00

Memo Item

B. Lindsley, Heather, L., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2251 Warm Springs Ct

City Green Bay	State WI	Zip Code 54311-5032
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Woodmen Financial Resources	Occupation (for Individual) Registered Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
682.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482344

Amount of Each Receipt this Period
30.00

Memo Item

C. Hawk, James, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 300 S. Water Street

City Las Cruces	State NM	Zip Code 88001-1227
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
204.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		10		2018

Transaction ID : 15482371

Amount of Each Receipt this Period
51.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	136.00
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 60 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Watson, Bessann, H., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1308 N Barcelona St
 City Pensacola State FL Zip Code 32501-2002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) North Florida Financial Occupation (for Individual) Insurance Agent
 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
 05 / 10 / 2018
Transaction ID : 15482460
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Broussard, Lori, W., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 292
 City Estherwood State LA Zip Code 70534-0292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Financial Associates - Southe Occupation (for Individual) Financial Professional
 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
 05 / 10 / 2018
Transaction ID : 15482494
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Wriston, Misti, D., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8129 NW 32
 City Bethany State OK Zip Code 73008-4351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farmers Insurance Group Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018
Transaction ID : 15482634
 Amount of Each Receipt this Period
 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	160.00
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 61 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Jordan, Alan, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 421 E Washington St

City Slinger	State WI	Zip Code 53086-9440
-----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Ins.	Occupation (for Individual) RIPC
--	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
242.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018

Transaction ID : 15482755

Amount of Each Receipt this Period
10.00

Memo Item

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

Mailing Address 1722 Colby Cir

City Springdale	State AR	Zip Code 72764-5845
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Cabot Lodge Securities	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018

Transaction ID : 15482784

Amount of Each Receipt this Period
60.00

Memo Item

C. Biesemeyer, Laura, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 438 Woodson Road

City Overbrook	State KS	Zip Code 66524-9102
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Advisors Excel	Occupation (for Individual) VP of Life Sales & Administration
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018

Transaction ID : 15482878

Amount of Each Receipt this Period
45.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	115.00
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 62 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Curtis, James, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 S Highland St

City Du Bois	State PA	Zip Code 15801-2039
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Ameritas	Occupation (for Individual) General Agent
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15483088

Amount of Each Receipt this Period
84.00

Memo Item

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

Mailing Address 1702 Blue Lake Court

City Franklin	State TN	Zip Code 37064-9643
------------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) Financial Planner
---	--

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
05	/	10	/	2018

Transaction ID : 15483185

Amount of Each Receipt this Period
50.00

Memo Item

C. Gillies, Blake, F., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 275 Doral Ln

City La Place	State LA	Zip Code 70068-1707
------------------	-------------	------------------------

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

Name of Employer (for Individual) The DI Center	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	10	/	2018

Transaction ID : 15483220

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	194.00
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 63 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Onu, Isaac, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Perimeter Summit Blvd. NE
Apt. 2313

City Brookhaven	State GA	Zip Code 30319-1481
--------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) Financial Services Specialist
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018

Transaction ID : 15483417

Amount of Each Receipt this Period
42.00

Memo Item

B. Call, Dana, A., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1603 Roma Lane

City Allen	State TX	Zip Code 75013-3038
---------------	-------------	------------------------

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

Name of Employer (for Individual) Capital Financial Architects/Guardian	Occupation (for Individual) Financial Professional
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
730.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 10 / 2018

Transaction ID : 15483459

Amount of Each Receipt this Period
45.00

Memo Item

C. DeGolier, Laura, P., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 114 S Main St
Pmb 301

City Fond Du Lac	State WI	Zip Code 54935-4229
---------------------	-------------	------------------------

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

Name of Employer (for Individual) DeGolier Insurance Services, LLC	Occupation (for Individual) Agency_Owner
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
437.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 11 / 2018

Transaction ID : 15483531

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	112.00
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 64 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Anderson, Terry, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 412 South Main
 City Brookings State SD Zip Code 57006-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Anderson Insurance Associates Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt 05 / 11 / 2018
Transaction ID : 15483533
 Amount of Each Receipt this Period 125.00
 Memo Item

B. Seropian, Vincent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 180 Mercer St 6B
 City Somerville State NJ Zip Code 08876-1554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Integrated Financial Concepts Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 11 / 2018
Transaction ID : 15483551
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Feldman, Marvin, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 Eagle Pointe
 City Palm Harbor State FL Zip Code 34685-3339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Feldman Financial Group Occupation (for Individual) President/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 14 / 2018
Transaction ID : 15483558
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1125.00
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 65 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Carmichael, Kelli, J., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2914 S Coffman Ave
 City Casper State WY Zip Code 82604-4733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lincoln Financial Advisors Occupation (for Individual) Financial_Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : 15483569
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Gaudreau, Jules, O., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Laurel Ln
 City Wilbraham State MA Zip Code 01095-1565
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Gaudreau Group, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : 15483574
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Birdwell, William, Clay, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 213 Cherokee Rd.
 City Nashville State TN Zip Code 37205-1817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Baker Birdwell, LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 140.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2018
Transaction ID : 15483580
 Amount of Each Receipt this Period
 - 70.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	580.00
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 66 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Solano, Adam, A., Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12 Lighthouse Ln

City Third Lake	State IL	Zip Code 60030-2638
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Lakeside Financial Group	Occupation (for Individual) Financial_Advisor
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		15		2018

Transaction ID : 15483589

Amount of Each Receipt this Period
300.00

Memo Item

B. Gaudreau, Jules, O., Mr., Jr.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Laurel Ln

City Wilbraham	State MA	Zip Code 01095-1565
-------------------	-------------	------------------------

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

Name of Employer (for Individual) The Gaudreau Group, Inc.	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2018

Transaction ID : 15483606

Amount of Each Receipt this Period
4000.00

Memo Item

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

Mailing Address 1132 N 42nd Pl

City Renton	State WA	Zip Code 98056-2169
----------------	-------------	------------------------

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

Name of Employer (for Individual) Northwestern Mutual	Occupation (for Individual) Special Agent
--	--

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
05		16		2018

Transaction ID : 15483612

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	4550.00
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 67 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Taggart, Christopher, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 2936

City Cody	State WY	Zip Code 82414-2936
--------------	-------------	------------------------

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

Name of Employer (for Individual) Taggart Company	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2018

Transaction ID : 15483616

Amount of Each Receipt this Period
500.00

Memo Item

B. Martin, Janet, L., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 Longview Pointe

City Cartersville	State GA	Zip Code 30120-4038
----------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		17		2018

Transaction ID : 15483620

Amount of Each Receipt this Period
1250.00

Memo Item

C. Prien, Henry, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 417 16th Ave S

City Fargo	State ND	Zip Code 58103-4329
---------------	-------------	------------------------

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

Name of Employer (for Individual) American Family Insurance Co.	Occupation (for Individual) Agency_Manager
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483635

Amount of Each Receipt this Period
50.40

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.40
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 68 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Currey, Thomas, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 701 W. Church St
 City Grand Prairie State TX Zip Code 75050-5532
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Thomas D. Currey Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483638
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Collins, Barbara, R., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32791 Smiths Ferry Rd.
 City Bellevue State IA Zip Code 52031-4700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farm Bureau Financial Services Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 201.60

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483640
 Amount of Each Receipt this Period 50.40
 Memo Item

C. Weitzel, Don, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P O Box 338
 City Kingston State GA Zip Code 30145-0338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483650
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	342.40
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 69 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Holzberg, Lawrence, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 82 Redan Drive
 City Smithtown State NY Zip Code 11787-4462
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Wealth Advisory Group LLC Occupation (for Individual) Agency_Manager
 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
 05 / 20 / 2018
Transaction ID : 15483652
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. Hatton, Chris, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2021 Wanderlust Dr
 City Lewisville State TX Zip Code 75067-7414
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Money Matters Occupation (for Individual) ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2018
Transaction ID : 15483674
 Amount of Each Receipt this Period
 125.00
 Memo Item

C. Franczyk, Lance, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2224 E 24th St
 City Tulsa State OK Zip Code 74114-2912
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 504.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2018
Transaction ID : 15483678
 Amount of Each Receipt this Period
 126.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	326.00
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 70 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Holladay, Timothy, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7127 US Highway 19
 City New Port Richey State FL Zip Code 34652-1638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Ins. Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483680
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Grava, A., Andra, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1031 Big Spring Dr
 City Allen State TX Zip Code 75013-5681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The DI Center Occupation (for Individual) General Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483687
 Amount of Each Receipt this Period 210.00
 Memo Item

C. Frappampina, Pat, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7401 Lazy Hammock Way
 City Flowery Branch State GA Zip Code 30542-7729
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WoodmenLife Occupation (for Individual) Regional Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483691
 Amount of Each Receipt this Period 62.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	372.50
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 71 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Scott, Cammie, K., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2816 North Thompson
 City Springdale State AR Zip Code 72764-1712
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CK Harp & Associates Occupation (for Individual) Agency_Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 549.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483693
 Amount of Each Receipt this Period 126.00
 Memo Item

B. Pittman, Joseph, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7430 Vinton St
 City Omaha State NE Zip Code 68124-3452
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Creative Association Management Occupation (for Individual) Executive VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483695
 Amount of Each Receipt this Period 42.50
 Memo Item

C. Ogden, John, Henry, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 Mohawk Cir
 City Springdale State AR Zip Code 72764-7547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Farmers Insurance Group Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483703
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	228.50
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 72 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Westhoelter, Shane, E., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 Dublin Blvd
 Suite F PMB 57
 City Dublin State CA Zip Code 94568-4603
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gateway Financial Advisors, Inc Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483705
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Yee, Gordon, W. S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3156 Elua St
 City Lihue State HI Zip Code 96766-1211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YeeCorp Insurance Services Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483706
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Bryson, Trent, D., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3777 Long Beach Boulevard
 Ste 500
 City Long Beach State CA Zip Code 90807-3351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bryson Financial Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483732
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	397.00
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 73 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Parke, Catherine, E., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 565 Whispering Pine Dr.

City Twin Falls	State ID	Zip Code 83301-7555
--------------------	-------------	------------------------

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

Name of Employer (for Individual) United Heritage Life	Occupation (for Individual) Agent
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483747

Amount of Each Receipt this Period
60.00

Memo Item

B. Burris, Joel, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1539 Merriman Avenue

City Charlotte	State NC	Zip Code 28203-4223
-------------------	-------------	------------------------

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

Name of Employer (for Individual) GLB Wealth Management	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483748

Amount of Each Receipt this Period
42.00

Memo Item

C. Hales, Paul, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3540 E. Longwing Ln #210

City Meridian	State ID	Zip Code 83646-1125
------------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Idaho	Occupation (for Individual) General Agenet
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483751

Amount of Each Receipt this Period
84.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	186.00
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 74 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Jordan, Brandon, O., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 235 Greencastle Rd Ste A
 City Tyrone State GA Zip Code 30290-2944
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Arch Advisory Group Occupation (for Individual) Financial Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483772
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Hedrick, J., Brent, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 Forest View Dr
 City Winston Salem State NC Zip Code 27104-3639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern Mutual Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483781
 Amount of Each Receipt this Period 42.00
 Memo Item

C. Rivas, Stephanie, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Bishop Road
 City Oxford State CT Zip Code 06478-1597
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prudential Occupation (for Individual) Managing Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483786
 Amount of Each Receipt this Period 42.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	126.00
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 75 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Matrullo, Jonathan, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 Phillips Ct

City Cranston	State RI	Zip Code 02921-3318
------------------	-------------	------------------------

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

Name of Employer (for Individual) Baystate Financial	Occupation (for Individual) ADVISOR
---	--

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
05		20		2018

Transaction ID : 15483787

Amount of Each Receipt this Period
50.00

Memo Item

B. Zeidler, Carl, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O Box 706
14918 Lippold RD

City Carlinville	State IL	Zip Code 62626-0706
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Wall Street Fin. Group	Occupation (for Individual) President
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
315.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483789

Amount of Each Receipt this Period
105.00

Memo Item

C. Huggins, Jason, D., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5175 Blue Yarrow Run

City Norcross	State GA	Zip Code 30092-5140
------------------	-------------	------------------------

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

Name of Employer (for Individual) Ashford Advisors	Occupation (for Individual) Advisor
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2018

Transaction ID : 15483803

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	197.00
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 76 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Pappas, Lola, Gena, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3038 Jefferson St.
 City Atlanta State GA Zip Code 30341-3228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Southern Financial Group Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483817
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Jacobson, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4200 North Point Blvd
 City Baltimore State MD Zip Code 21222-3631
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Laurie Jacobson Insurance Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 261.30

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483822
 Amount of Each Receipt this Period 52.26
 Memo Item

C. Crump, Samuel, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3119 Hwy 150 East
 City Greensboro State NC Zip Code 27455
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Greensboro District Office Occupation (for Individual) Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 20 / 2018
Transaction ID : 15483825
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	144.26
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 77 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Lancaster, Tonya, S.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1992 Cheyanne Drive
 City Smyrna State GA Zip Code 30080-3142
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Voluntary Benefits at Work Occupation (for Individual) Independent_Agent
 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
 05 / 20 / 2018
Transaction ID : 15483842
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BISHOP, KRISTIN, S., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13506 Kalmbacks Mill Dr
 City FREDERICKSBURG State VA Zip Code 22407-1982
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BISHOP FAMILY INSURANCE AGENCY, INC Occupation (for Individual) Agency_Owner
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 20 / 2018
Transaction ID : 15483858
 Amount of Each Receipt this Period
 84.00
 Memo Item

C. Sanders, Gary, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1104 Lyndale Drive
 City Alexandria State VA Zip Code 22308-1033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 208.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2018
Transaction ID : 15483864
 Amount of Each Receipt this Period
 20.85
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	154.85
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 78 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Woleben, John, M., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8821 Carters Cove Rd
 City Suffolk State VA Zip Code 23433-1428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Friedman Associates Financial Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 05 / 21 / 2018
Transaction ID : 15483868
 Amount of Each Receipt this Period
 125.00
 Memo Item

B. Fortenberry, H., Larry, Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 123 Northshore Pt
 City Madison State MS Zip Code 39110-7272
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Executive Planning Group President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt
 05 / 21 / 2018
Transaction ID : 15483872
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Borntlager, Jonas, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3861 Singers Glen Rd
 City Rockingham State VA Zip Code 22802-9105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Jonas Borntlager Insurance Secy-Tres
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 05 / 21 / 2018
Transaction ID : 15483876
 Amount of Each Receipt this Period
 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 79 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Guess, Joseph, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 249

City Pickens	State MS	Zip Code 39146-0249
-----------------	-------------	------------------------

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

Name of Employer (for Individual) The Leaders Group, Inc.	Occupation (for Individual) Branch Manager
--	---

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
05		21		2018

Transaction ID : 15483880

Amount of Each Receipt this Period
250.00

Memo Item

B. Fox, Joseph, P., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1751 Upper 55th St, E.

City Inver Grove Heights	State MN	Zip Code 55077-1694
-----------------------------	-------------	------------------------

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

Name of Employer (for Individual) North Star Resource Group	Occupation (for Individual) Financial_Advisor
--	--

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
05		21		2018

Transaction ID : 15483884

Amount of Each Receipt this Period
250.00

Memo Item

C. Morgan, Judy, B., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 196 Tallulah Rdg

City Hattiesburg	State MS	Zip Code 39402-7626
---------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2018

Transaction ID : 15483892

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	800.00
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 80 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Boyle, Diane, , Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3419 N Emerson St

City Arlington	State VA	Zip Code 22207-1834
-------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Vice_President
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2018

Transaction ID : 15483897

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 2901 Telestar Ct

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
416.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2018

Transaction ID : 15483900

Amount of Each Receipt this Period
41.66

Memo Item

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

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
420.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2018

Transaction ID : 15483904

Amount of Each Receipt this Period
42.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	383.66
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 81 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Carsrud, Judith, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Court

City Falls Church	State VA	Zip Code 22042-1260
----------------------	-------------	------------------------

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

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

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
05	/	21	/	2018

Transaction ID : 15483908

Amount of Each Receipt this Period
25.00

Memo Item

B. Mayeux, Kevin, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2901 Telestar Ct

City Falls Church	State VA	Zip Code 22042-1260
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2083.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	21	/	2018

Transaction ID : 15483910

Amount of Each Receipt this Period
208.33

Memo Item

C. Prien, Henry, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 417 16th Ave S

City Fargo	State ND	Zip Code 58103-4329
---------------	-------------	------------------------

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

Name of Employer (for Individual) American Family Insurance Co.	Occupation (for Individual) Agency_Manager
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
261.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	22	/	2018

Transaction ID : 15483918

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	293.33
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 82 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Deitemeyer, Tim, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1525 31st Ave S

City Fargo	State ND	Zip Code 58103-3468
---------------	-------------	------------------------

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

Name of Employer (for Individual) National Planning Corporation	Occupation (for Individual) Advisor
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 401.10

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483925

Amount of Each Receipt this Period
 377.10

Memo Item

B. Judd, Jill, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7551 Arden Way

City Aptos	State CA	Zip Code 95003-3808
---------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 365.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483940

Amount of Each Receipt this Period
 50.00

Memo Item

C. Berndt, Lyle, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1166 16th Avenue W

City Dickinson	State ND	Zip Code 58601-3603
-------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) District Representative
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 790.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483943

Amount of Each Receipt this Period
 640.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1067.10
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 83 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Berndt, Lyle, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1166 16th Avenue W

City Dickinson	State ND	Zip Code 58601-3603
-------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) District Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
965.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483944

Amount of Each Receipt this Period
175.00

Memo Item

B. Berndt, Lyle, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1166 16th Avenue W

City Dickinson	State ND	Zip Code 58601-3603
-------------------	-------------	------------------------

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

Name of Employer (for Individual) New York Life	Occupation (for Individual) District Representative
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1065.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483945

Amount of Each Receipt this Period
100.00

Memo Item

C. Westgard Larson, Jessica, L., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5622 43rd St S

City Fargo	State ND	Zip Code 58104-6098
---------------	-------------	------------------------

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

Name of Employer (for Individual) Principal	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
170.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 15483954

Amount of Each Receipt this Period
70.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	345.00
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 84 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Westgard Larson, Jessica, L., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5622 43rd St S
 City Fargo State ND Zip Code 58104-6098
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2018
Transaction ID : 15483955
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Parrish, Denwood, B., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2054 Cherrywood Dr
 City Melbourne State FL Zip Code 32935-5517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Parrish and Ovens Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 262.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2018
Transaction ID : 15483957
 Amount of Each Receipt this Period 262.50
 Memo Item

C. Cariveau-Peterson, Sheri, K., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3173 24th Ave S
 City Fargo State ND Zip Code 58103-5013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Principal Financial Group Occupation (for Individual) Producer Development Coor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2018
Transaction ID : 15483972
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	337.50
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 85 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Hildre, Jennifer, R., ,		Date of Receipt
Mailing Address PO Box 339		<input type="text" value="05"/> / <input type="text" value="22"/> / <input type="text" value="2018"/>
City Velva	State ND	Zip Code 58790-0339
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 15483978
Name of Employer (for Individual) American Family Insurance		Amount of Each Receipt this Period <input type="text" value="360.15"/>
Occupation (for Individual) Insurance Agent		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="465.15"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gores, Patrick, K., Mr.,		Date of Receipt
Mailing Address 2702 28 Ave. S		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2018"/>
City Fargo	State ND	Zip Code 58103-5045
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 15483986
Name of Employer (for Individual) Northwestern Mutual Life		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Occupation (for Individual) Managing Partner		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="550.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Phillips, Keith, A., Mr.,		Date of Receipt
Mailing Address 4044 S Rivershore Dr		<input type="text" value="05"/> / <input type="text" value="23"/> / <input type="text" value="2018"/>
City Moorhead	State MN	Zip Code 56560-5625
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : 15483988
Name of Employer (for Individual) Farmers Insurance		Amount of Each Receipt this Period <input type="text" value="138.00"/>
Occupation (for Individual) Insurance Agent		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="241.20"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="998.15"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 86 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Herman, Kyle, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2405 Del Rio Dr
 City Bismarck State ND Zip Code 58503-1195
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Kyle Herman Agency, LLC Occupation (for Individual) Agency Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 222.00

Date of Receipt 05 / 23 / 2018
Transaction ID : 15483990
 Amount of Each Receipt this Period 120.00
 Memo Item

B. Mahara, Rudolph, A., Mr., Sr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4646 W Jefferson Blvd Ste 185
 City Fort Wayne State IN Zip Code 46804-6832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mahara Wealth Partners Occupation (for Individual) District Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt 05 / 24 / 2018
Transaction ID : 15483996
 Amount of Each Receipt this Period 180.00
 Memo Item

C. Laliberte, Lisa, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 Grove St
 City Lewiston State ME Zip Code 04240-3425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) Lisa Laliberte
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 05 / 24 / 2018
Transaction ID : 15484002
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
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 87 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Miller, Mark, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1630 Prairie Dunes Drive

City Collierville	State TN	Zip Code 38017-4158
----------------------	-------------	------------------------

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

Name of Employer (for Individual) UCL Financial Group	Occupation (for Individual) ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
670.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Transaction ID : 15484003

Amount of Each Receipt this Period
210.00

Memo Item

B. Grava, A., Andra, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1031 Big Spring Dr

City Allen	State TX	Zip Code 75013-5681
---------------	-------------	------------------------

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

Name of Employer (for Individual) The DI Center	Occupation (for Individual) General Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Transaction ID : 15484004

Amount of Each Receipt this Period
500.00

Memo Item

C. Judd, Jill, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7551 Arden Way

City Aptos	State CA	Zip Code 95003-3808
---------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
565.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Transaction ID : 15484011

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	910.00
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 88 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Jordan, Alan, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 E Washington St
 City Slinger State WI Zip Code 53086-9440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Ins. Occupation (for Individual) RIPC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 317.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2018
Transaction ID : 15484013
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. Shannon, Ruth, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3030 S. Island Drive
 City Seabrook State TX Zip Code 77586-1648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUTH SHANNON STATE FARM Occupation (for Individual) Sales Leader Houston-Pearland Territo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2018
Transaction ID : 15484019
 Amount of Each Receipt this Period
 35.00
 Memo Item

C. Horak, Jeffrey, , Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3009 Bolero St
 City College Station State TX Zip Code 77845-6548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Goosehead Insurance Occupation (for Individual) Owner/Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2018
Transaction ID : 15484020
 Amount of Each Receipt this Period
 130.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
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 89 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Fulchiron, Peter, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 411 San Andreas Dr

City Novato	State CA	Zip Code 94945-1237
----------------	-------------	------------------------

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

Name of Employer (for Individual) Peter Fulchiron	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484022

Amount of Each Receipt this Period
20.00

Memo Item

B. Dooley, Deanna, S., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1567 Edmond Drive

City San Carlos	State CA	Zip Code 94070-4235
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Dooley Insurance Services	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484026

Amount of Each Receipt this Period
500.00

Memo Item

C. Kaltenbach, Terry, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1358 Ahlrich Ave

City Encintas	State CA	Zip Code 92024-4029
------------------	-------------	------------------------

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

Name of Employer (for Individual) Kbach Associates Insurance Services	Occupation (for Individual) President/CEO
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
412.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484030

Amount of Each Receipt this Period
12.50

Memo Item

SUBTOTAL of Receipts This Page (optional).....	532.50
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 90 OF 140
	<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 Association of Insurance and Financial Advisors Political Action Comm

A. Gillies, Keith, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6721 Canal Blvd.

City New Orleans	State LA	Zip Code 70124-3301
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Ameritas	Occupation (for Individual) Managing Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484033

Amount of Each Receipt this Period
1000.00

Memo Item

B. Holladay, Timothy, H., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7127 US Highway 19

City New Port Richey	State FL	Zip Code 34652-1638
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Ins.	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484037

Amount of Each Receipt this Period
250.00

Memo Item

C. Alfheim, Kristin, M., Mrs.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1534 Navajo Ct

City Green Bay	State WI	Zip Code 54313-6777
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Futurity First Insurance Group	Occupation (for Individual) Associate Managing Director
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		25		2018

Transaction ID : 15484048

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 91 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Lindsley, Heather, L., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2251 Warm Springs Ct
 City Green Bay State WI Zip Code 54311-5032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Woodmen Financial Resources Occupation (for Individual) Registered Representative
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 732.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2018
Transaction ID : 15484050
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Jones, David, S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5260 Ashwoode Downs Dr
 City Johns Creek State GA Zip Code 30005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) National Financial Services Group Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2018
Transaction ID : 15484053
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Geissler, Aprilyn, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6809 Pueblo Verde NE
 City Albuquerque State NM Zip Code 87111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Chavez Geissler Agency Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 612.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 25 / 2018
Transaction ID : 15484055
 Amount of Each Receipt this Period
 12.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	562.00
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 92 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. McCullough, Roger, S., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2759 19th Ave N
 City Fort Dodge State IA Zip Code 50501-7838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Equitable Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2650.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484077
 Amount of Each Receipt this Period 150.00
 Memo Item

B. Holz, Bryon, A., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 Cindy Ln
 City Brandon State FL Zip Code 33510-3905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bryon Holz & Associates Occupation (for Individual) Independent Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 668.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484081
 Amount of Each Receipt this Period 150.00
 Memo Item

C. Farabee, David, L., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 Buchanan
 City Wichita Falls State TX Zip Code 76309-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Boley-Featherston Ins. Occupation (for Individual) Financial Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 234.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484083
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 93 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Stratton, David, L., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13115 Beach Cir

City Anchorage	State AK	Zip Code 99515-3748
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Stratton Financial Management	Occupation (for Individual) Financial Planner
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1764.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484086

Amount of Each Receipt this Period
100.00

Memo Item

B. Brown, Michael, O., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6512 NE 113th St

City Edmond	State OK	Zip Code 73013-8351
----------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
594.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484088

Amount of Each Receipt this Period
90.00

Memo Item

C. Potts, Charles, W., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12725 Saint Andrews Ter

City Oklahoma City	State OK	Zip Code 73120-8807
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) MassMutual Financial Group	Occupation (for Individual) Agent/Broker
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
504.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484090

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	490.00
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 94 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Cuccinelli, Dennis, P., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1697
 City Rutherford State NJ Zip Code 07070-0697
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Integrated Financial Concepts, LLC Occupation (for Individual) Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484092
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DeGolier, Laura, P., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 114 S Main St Pmb 301
 City Fond Du Lac State WI Zip Code 54935-4229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DeGolier Insurance Services, LLC Occupation (for Individual) Agency_Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 687.50

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484094
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Easterling, Karen, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2711 W. Anderson Ln #201
 City Austin State TX Zip Code 78757-1121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) Agent/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484096
 Amount of Each Receipt this Period 750.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 95 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Cannady, Mary Anne, , Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 799

City Walterboro	State SC	Zip Code 29488-0008
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Cannady Agency, Inc.	Occupation (for Individual) General Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484098

Amount of Each Receipt this Period
500.00

Memo Item

B. Browne, Peter, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10 Old Jackson Ave.

City Hastings On Hudson	State NY	Zip Code 10706-3203
----------------------------	-------------	------------------------

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

Name of Employer (for Individual) PRB Wealth Management	Occupation (for Individual) Principal
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484100

Amount of Each Receipt this Period
1250.00

Memo Item

C. Danford, Christopher, R., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 347 Brentwood Club Cv

City Longwood	State FL	Zip Code 32750-3353
------------------	-------------	------------------------

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

Name of Employer (for Individual) Thrivent Financial	Occupation (for Individual) Senior_Partner
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		29		2018

Transaction ID : 15484103

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 96 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Deal, Glenn, P., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 58 Golf Course Ln
 P O Box 787
 City Taylorsville State NC Zip Code 28681-7847
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Thrivent Financial Occupation (for Individual) Financial Associate
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484105
 Amount of Each Receipt this Period 165.00
 Memo Item

B. Havir, Gary, T., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 N Main Street
 Unit 324
 City Stillwater State MN Zip Code 55082-6749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Horace Mann Companies Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 588.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484109
 Amount of Each Receipt this Period 88.00
 Memo Item

C. Bowler, Allen, O., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10321 Stroganof Drive
 City Anchorage State AK Zip Code 99507-6471
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) AGENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 218.00

Date of Receipt 05 / 29 / 2018
Transaction ID : 15484121
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 303.00
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 97 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Martin, Janet, L., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 Longview Pointe
 City Cartersville State GA Zip Code 30120-4038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) State Farm Insurance Companies Occupation (for Individual) Agent/Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : 15484123
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Van Ham, James, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2748 Newport Drv
 City Naperville State IL Zip Code 60565-4336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Strategic Financial Group, Inc. Occupation (for Individual) Certified Financial Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 334.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : 15484131
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Wheeler, John, W., Mr., Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1075 Aster Ln
 City West Chicago State IL Zip Code 60185-1750
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Water Tower Financial Partners, LLC Occupation (for Individual) Executive Vice President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : 15484132
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 98 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Gandy, Hollie, C., Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7812 Tripp Ave
 City Amarillo State TX Zip Code 79121-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Safe Money Solutions Group Occupation (for Individual) Owner/Senior Producer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : 15484150
 Amount of Each Receipt this Period
 75.00
 Memo Item

B. Shannon, Angela, Marie, Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 370 8th St
 City Plainwell State MI Zip Code 49080-9501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Angela Shannon Insurance Agency Occupation (for Individual) AGENT
 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
 05 / 29 / 2018
Transaction ID : 15484163
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. O'Connell, Daniel, J., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7228 Lakehurst Ave
 City Dallas State TX Zip Code 75230-5438
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Next Level Insurance Agency Occupation (for Individual) Agent/Owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 29 / 2018
Transaction ID : 15484173
 Amount of Each Receipt this Period
 650.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	825.00
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 99 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. King, Jason, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 Hwy 190
Apt. 2110

City Mandeville State LA Zip Code 70448-3490

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

Name of Employer (for Individual) Gulf Coast Wealth Management Occupation (for Individual) Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 29 / 2018
Transaction ID : 15484174

Amount of Each Receipt this Period
250.00

Memo Item

B. Wallace, Leigh, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 510 Orchard Brook Court

City Florence State MS Zip Code 39073-6010

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

Name of Employer (for Individual) Lincoln Financial Advisors Occupation (for Individual) ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 30 / 2018
Transaction ID : 15484196

Amount of Each Receipt this Period
150.00

Memo Item

C. Grimes, Gregory, Lynn, Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4404 Ryefield Ct

City Columbia State MO Zip Code 65203-6495

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

Name of Employer (for Individual) Financial Resource Group, LLC Occupation (for Individual) Financial_Planner

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
320.00

Date of Receipt
05 / 30 / 2018
Transaction ID : 15484203

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 100 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Peters, Mike, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6446 River Rd

City New Port Richey	State FL	Zip Code 34652-2224
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) State Farm Insurance Cos.	Occupation (for Individual) Agent
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : 15484216

Amount of Each Receipt this Period
250.00

Memo Item

B. Rosenthal, Richard, J., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8912 SW 81 Terr

City Miami	State FL	Zip Code 33173-4189
---------------	-------------	------------------------

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

Name of Employer (for Individual) The Rosenthal Agency, Inc	Occupation (for Individual) Vice-President
--	---

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
05		30		2018

Transaction ID : 15484218

Amount of Each Receipt this Period
250.00

Memo Item

C. Young, Tallie, O., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6318 Falcon Crest Court

City Sachse	State TX	Zip Code 75048-3539
----------------	-------------	------------------------

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

Name of Employer (for Individual) Tallie O Young & Associates	Occupation (for Individual) Investment Advisor Representative
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : 15484221

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 101 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Matthew, Patricia, M., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1225
 536 Lincoln Ave
 City Big Sandy State MT Zip Code 59520-1225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Waddell & Reed Occupation (for Individual) Financial_Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2018
Transaction ID : 15484234
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Broussard, Lori, W., Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 292
 City Estherwood State LA Zip Code 70534-0292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Southern Financial Associates - Southe Occupation (for Individual) Financial Professional
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2018
Transaction ID : 15484243
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Thompson, James, R., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7400 Cobblestone Dr
 City Amarillo State TX Zip Code 79119-6250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Thompson Financial Consulting Inc. Occupation (for Individual) Financial_Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 313.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 30 / 2018
Transaction ID : 15484252
 Amount of Each Receipt this Period
 145.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	745.00
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 102 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Male, Mark, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Exchange St Unit 1317

City Providence	State RI	Zip Code 02903-2625
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA Rhode Island	Occupation (for Individual) Executive_Director
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : 15484254

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 3030 S. Island Drive

City Seabrook	State TX	Zip Code 77586-1648
------------------	-------------	------------------------

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

Name of Employer (for Individual) RUTH SHANNON STATE FARM	Occupation (for Individual) Sales Leader Houston-Pearland Territo
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
253.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2018

Transaction ID : 15484262

Amount of Each Receipt this Period
50.00

Memo Item

C. Lambert, Larry, M., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6815 Pinehurst Ave. SE

City Snoqualmie	State WA	Zip Code 98065-9010
--------------------	-------------	------------------------

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

Name of Employer (for Individual) The LBL Group - Larry Lambert & Associ	Occupation (for Individual) CHAIRMAN
---	---

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
05		31		2018

Transaction ID : 15484277

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
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 103 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Sanders, Gary, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1104 Lyndale Drive

City Alexandria	State VA	Zip Code 22308-1033
--------------------	-------------	------------------------

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

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) Insurance Agent
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
229.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484278

Amount of Each Receipt this Period
20.85

Memo Item

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

Mailing Address 2711 W. Anderson Ln #201

City Austin	State TX	Zip Code 78757-1121
----------------	-------------	------------------------

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

Name of Employer (for Individual) State Farm Insurance Companies	Occupation (for Individual) Agent/Owner
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484286

Amount of Each Receipt this Period
- 750.00

Memo Item

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

Mailing Address 3428 Aspen Trail

City Clearwater	State FL	Zip Code 33761-1101
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Craig Duncan Insurance Agency Inc.	Occupation (for Individual) AGENT
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484306

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	- 679.15
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 104 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Sztapka, Joseph, A., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7300 S. Burleigh Circle

City Sioux Falls	State SD	Zip Code 57108-1556
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Modern Woodmen of America	Occupation (for Individual) Regional_Director
--	--

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
05		31		2018

Transaction ID : 15484310

Amount of Each Receipt this Period
250.00

Memo Item

B. Michel, Thomas, O., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16880 Avenida de Santa Ynez

City Pacific Palisades	State CA	Zip Code 90272-2127
---------------------------	-------------	------------------------

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

Name of Employer (for Individual) Michel Financial Group	Occupation (for Individual) Managing Director
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484315

Amount of Each Receipt this Period
100.00

Memo Item

C. Glaser, Steven, E., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 692 Elsie Avenue

City San Leandro	State CA	Zip Code 94577-5212
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Aerenson Glaser Insurance Co	Occupation (for Individual) Insurance Agent
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484327

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
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 105 OF 140
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Boyle, Diane, , Mrs.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3419 N Emerson St
 City Arlington State VA Zip Code 22207-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Vice_President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484328
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Corcoran, Jennifer, Ellis, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Ct.
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA Occupation (for Individual) Executive Administrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484330
 Amount of Each Receipt this Period
 20.00
 Memo Item

C. Owens, Sheila, , Ms.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Ct
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 458.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484335
 Amount of Each Receipt this Period
 41.66
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	361.66
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 106 OF 140
<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 Association of Insurance and Financial Advisors Political Action Comm

A. Cassidy, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Court
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484337
 Amount of Each Receipt this Period 42.00
 Memo Item

B. Sheridan, Stephanie, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Court
 City Falls Church State VA Zip Code 22042-1205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA- Headquarters Occupation (for Individual) Insurance Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484338
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Carsrud, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2901 Telestar Court
 City Falls Church State VA Zip Code 22042-1260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAIFA Occupation (for Individual) Lobbyist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2018
Transaction ID : 15484341
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	87.00
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 107 OF 140
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Mayeux, Kevin, M., Mr.,

Mailing Address 2901 Telestar Ct

City Falls Church	State VA	Zip Code 22042-1260
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NAIFA- Headquarters	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2291.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		31		2018

Transaction ID : 15484348

Amount of Each Receipt this Period
208.33

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Gallman, David, Christopher, Mr.,

Mailing Address 4935 Shiloh Dr

City Loganville	State GA	Zip Code 30052-3401
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Chris Gallman State Farm Agency	Occupation (for Individual) AGENT
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 17.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		03		2018

Transaction ID : 15565017

Amount of Each Receipt this Period
0.00

Memo Item

Refund(s) on Schedule B Totaling \$17.00 This changes the YTD Total to \$-17.00

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)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	208.33
TOTAL This Period (last page this line number only).....	44450.42

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 108 OF 140
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
National Association of Insurance and Financial Advisors Political Action Comm

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Ryan For Congress, Inc.

Mailing Address **PO Box 1488**

City Janesville	State WI	Zip Code 53547
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C** **C00330894**

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 09 / 2018

Transaction ID : 15440078

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Rick W. Allen For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

Mailing Address P. O. Box 338

City Augusta State GA Zip Code 30903

FEC Identification Number

C C00504019

Transaction ID : 15420167

Amount of Each Disbursement this Period

2000.00

Memo Item

Purpose of Disbursement

011
Category/
Type

Candidate Name

Allen, Rick, W., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: GA District: 12

Full Name (Last, First, Middle Initial)

B. Beatty For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

Mailing Address 222 East Town Street Suite 2w

City Columbus State OH Zip Code 43215

FEC Identification Number

C C00507368

Transaction ID : 15420277

Amount of Each Disbursement this Period

2500.00

Memo Item

Purpose of Disbursement

011
Category/
Type

Candidate Name

Beatty, Joyce, B., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: OH District: 03

Full Name (Last, First, Middle Initial)

C. Committee To Re-Elect Linda Sanchez

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

Mailing Address 410 1st St Se Suite 310

City Washington State DC Zip Code 20003

FEC Identification Number

C C00384057

Transaction ID : 15423829

Amount of Each Disbursement this Period

1000.00

Memo Item

Candidate Name

Sanchez, Linda, T., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 38

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Pittenger For Congress Llc

Mailing Address PO Box 11207

City Charlotte State NC Zip Code 28220

Purpose of Disbursement

Category/
Type

Candidate Name

Pittenger, Robert, , Rep.,

Office Sought: House
 Senate
 President
State: NC District: 09

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15425480

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Mia Love

Mailing Address PO Box 255

City Riverton State UT Zip Code 84065

Purpose of Disbursement

Category/
Type

Candidate Name

Love, Mia, , Rep.,

Office Sought: House
 Senate
 President
State: UT District: 04

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15425481

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Loudermilk For Congress

Mailing Address PO Box 447

City Cassville State GA Zip Code 30123

Purpose of Disbursement

Category/
Type

Candidate Name

Loudermilk, Barry, , Rep.,

Office Sought: House
 Senate
 President
State: GA District: 11

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15425482

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Joe Wilson For Congress

Mailing Address PO Box 2145

City
West Columbia

State
SC

Zip Code
29171

Purpose of Disbursement

011

Category/
Type

Candidate Name

Wilson, Joe, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	8

FEC Identification Number

C C00368522

Transaction ID : 15425483

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Mia Love

Mailing Address PO Box 255

City
Riverton

State
UT

Zip Code
84065

Purpose of Disbursement

011

Category/
Type

Candidate Name

Love, Mia, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: UT District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	8

FEC Identification Number

C C00505776

Transaction ID : 15425615

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lucas For Congress

Mailing Address PO Box 1726

City
Oklahoma City

State
OK

Zip Code
73101

Purpose of Disbursement

011

Category/
Type

Candidate Name

Lucas, Frank, D., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: OK District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	8

FEC Identification Number

C C00287912

Transaction ID : 15425616

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Cole For Congress

Mailing Address P.O. Box 722256

City Norman State OK Zip Code 73070

Purpose of Disbursement

Category/Type

Candidate Name

Cole, Thomas, , Rep.,

Office Sought: House Senate President
State: OK District: 04

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15425617

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Steve Russell For Congress

Mailing Address PO Box 95023

City Oklahoma City State OK Zip Code 73143

Purpose of Disbursement

Category/Type

Candidate Name

Russell, Steve, , Rep.,

Office Sought: House Senate President
State: OK District: 05

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15425618

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. McClintock For Congress

Mailing Address 2150 River Plaza Dr. #150

City Sacramento State CA Zip Code 95833

Purpose of Disbursement

Category/Type

Candidate Name

McClintock, Tom, , Rep.,

Office Sought: House Senate President
State: CA District: 04

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15426297

Amount of Each Disbursement this Period

Memo Item

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

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

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

011

Category/
Type

Candidate Name

Thompson, Mike, , Rep.,

Office Sought: House Senate President
State: CA District: 05

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C00326363

Transaction ID : 15426311

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Julia Brownley For Congress

Mailing Address PO Box 2018

City Thousand Oaks State CA Zip Code 91358

Purpose of Disbursement

011

Category/
Type

Candidate Name

Brownley, Julia, , Rep.,

Office Sought: House Senate President
State: CA District: 26

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C00513077

Transaction ID : 15426312

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Tony Cardenas For Congress

Mailing Address 410 1st St, Se Suite 310

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Cardenas, Tony, , Rep.,

Office Sought: House Senate President
State: CA District: 29

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C00498873

Transaction ID : 15426313

Amount of Each Disbursement this Period

5000.00

Memo Item

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

7500.00

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

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Sherman For Congress

Mailing Address 777 S. Figueroa Street
Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement

Category/
Type

Candidate Name

Sherman, Brad, , Rep.,

Office Sought: House
 Senate
 President
State: CA District: 30

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15426314

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Ted Lieu For Congress

Mailing Address 16633 Ventura Blvd # 1008

City Encino State CA Zip Code 91436

Purpose of Disbursement

Category/
Type

Candidate Name

Lieu, Ted, W., Rep.,

Office Sought: House
 Senate
 President
State: CA District: 33

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15426315

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Scott For Congress

Mailing Address Post Office Box 251

City Newport News State VA Zip Code 23607

Purpose of Disbursement

Category/
Type

Candidate Name

Scott, Robert, C., Rep.,

Office Sought: House
 Senate
 President
State: VA District: 03

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15426316

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Rob Wittman For Congress

Mailing Address PO Box 3770

City
Oakton

State
VA

Zip Code
22124

Purpose of Disbursement

011

Category/
Type

Candidate Name

Wittman, Robert, J., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: VA District: 01

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2018

FEC Identification Number

C C00441014

Transaction ID : 15426317

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ted Budd For Congress

Mailing Address PO Box 97127

City
Raleigh

State
NC

Zip Code
27624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Budd, Theodore, P., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NC District: 13

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C C00614776

Transaction ID : 15440046

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pete King For Congress Committee

Mailing Address PO Box 1428

City
Seaford

State
NY

Zip Code
11783

Purpose of Disbursement

011

Category/
Type

Candidate Name

King, Pete, T., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NY District: 02

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C C00272211

Transaction ID : 15440047

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6500.00

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

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

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

FOR LINE NUMBER:
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<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 Association of Insurance and Financial Advisors Political Action Comm

A. Collins For Senator

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1096

City Bangor State ME Zip Code 04402

Purpose of Disbursement 011 Category/Type

Candidate Name
Collins, Susan, M., Sen.,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: ME District:

Date of Disbursement: 05 / 08 / 2018

FEC Identification Number: **C00314575**
Transaction ID : 15440049
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. Angus King For Us Senate Campaign

Full Name (Last, First, Middle Initial)
Mailing Address 114 Maine Street Suite 1a PO Box 368

City Brunswick State ME Zip Code 04011

Purpose of Disbursement 011 Category/Type

Candidate Name
King, Angus, S., Sen., Jr.

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: ME District:

Date of Disbursement: 05 / 08 / 2018

FEC Identification Number: **C00516047**
Transaction ID : 15440050
Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Angus King For Us Senate Campaign

Full Name (Last, First, Middle Initial)
Mailing Address 114 Maine Street Suite 1a PO Box 368

City Brunswick State ME Zip Code 04011

Purpose of Disbursement 011 Category/Type

Candidate Name
King, Angus, S., Sen., Jr.

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: ME District:

Date of Disbursement: 05 / 08 / 2018

FEC Identification Number: **C00516047**
Transaction ID : 15440051
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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

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

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

FOR LINE NUMBER:
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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Carper For Senate

Mailing Address PO Box 2882

City
Wilmington

State
DE

Zip Code
19805

Purpose of Disbursement

011

Category/
Type

Candidate Name

Carper, Thomas, R., Sen.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: DE

District:

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C00349217

Transaction ID : 15440052

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Katko For Congress

Mailing Address 228 S Washington St
Ste 115

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Katko, John, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: NY

District: 24

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C00556365

Transaction ID : 15440053

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Steve Russell For Congress

Mailing Address PO Box 95023

City
Oklahoma City

State
OK

Zip Code
73143

Purpose of Disbursement

011

Category/
Type

Candidate Name

Russell, Steve, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: OK

District: 05

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2018

FEC Identification Number

C00558510

Transaction ID : 15440054

Amount of Each Disbursement this Period

1500.00

Memo Item

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

5000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City
Sarasota

State
FL

Zip Code
34230

Purpose of Disbursement

011

Category/
Type

Candidate Name

Buchanan, Vern, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C C00412759

Transaction ID : 15440055

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City
Sarasota

State
FL

Zip Code
34230

Purpose of Disbursement

011

Category/
Type

Candidate Name

Buchanan, Vern, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C C00412759

Transaction ID : 15440056

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Bishop For Congress

Mailing Address PO Box 1148

City
Brighton

State
MI

Zip Code
48116

Purpose of Disbursement

011

Category/
Type

Candidate Name

Bishop, Michael, D., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		08		2018

FEC Identification Number

C C00561001

Transaction ID : 15440057

Amount of Each Disbursement this Period

2000.00

Memo Item

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

7000.00

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

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

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Bill Nelson For U S Senate

Mailing Address 972 W Whitmire Drive

City Melbourne State FL Zip Code 32935

Purpose of Disbursement

Category/
Type

Candidate Name
Nelson, Bill, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15450169

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Emmer For Congress

Mailing Address PO Box 998

City Anoka State MN Zip Code 55303

Purpose of Disbursement

Category/
Type

Candidate Name
Emmer, Tom, Earl, Rep., Jr.

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15450171

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Tina Smith for Minnesota

Mailing Address PO Box 14362

City Saint Paul State MN Zip Code 55114

Purpose of Disbursement

Category/
Type

Candidate Name
Smith, Tina, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MN District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15450173

Amount of Each Disbursement this Period

Memo Item

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

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

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

A. McNerney For Congress

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 690371

City Stockton State CA Zip Code 95269

Purpose of Disbursement 011 Category/Type

Candidate Name
McNerney, Jerry, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 09

Date of Disbursement: 05 / 10 / 2018

FEC Identification Number: **C00398644**
Transaction ID : 15450174
Amount of Each Disbursement this Period: 2000.00

Memo Item

B. Jackie Speier For Congress

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 112

City Burlingame State CA Zip Code 94011

Purpose of Disbursement 011 Category/Type

Candidate Name
Speier, Jackie, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 14

Date of Disbursement: 05 / 10 / 2018

FEC Identification Number: **C00443705**
Transaction ID : 15450175
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Swalwell For Congress

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2847

City Dublin State CA Zip Code 94568

Purpose of Disbursement 011 Category/Type

Candidate Name
Swalwell, Eric, M., Rep.,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 15

Date of Disbursement: 05 / 10 / 2018

FEC Identification Number: **C00502294**
Transaction ID : 15450176
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Jim Costa For Congress

Mailing Address 2037 W Bullard Ave
355

City Fresno State CA Zip Code 93711

Purpose of Disbursement

011

Category/
Type

Candidate Name

Costa, Jim, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 16

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00391029

Transaction ID : 15450177

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Ro For Congress Inc

Mailing Address PO Box 3513

City Santa Clara State CA Zip Code 95050

Purpose of Disbursement

011

Category/
Type

Candidate Name

Khanna, Ro, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: CA District: 17

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00503185

Transaction ID : 15450179

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Anna Eshoo For Congress

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

011

Category/
Type

Candidate Name

Eshoo, Anna, G., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: CA District: 18

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00258475

Transaction ID : 15450180

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Jimmy Panetta For Congress

Mailing Address PO Box 1579

City Carmel Valley State CA Zip Code 93924

Purpose of Disbursement

011

Category/
Type

Candidate Name

Panetta, Jimmy, Varni, Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 20

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00592154

Transaction ID : 15450181

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Jimmy Gomez For Congress

Mailing Address 3605 Long Beach Blvd., Suite 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement

011

Category/
Type

Candidate Name

Gomez, Jimmy, , ,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify)

State: CA District: 34

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00629659

Transaction ID : 15450182

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Mark Takano For Congress

Mailing Address PO Box 5214

City Riverside State CA Zip Code 92517

Purpose of Disbursement

011

Category/
Type

Candidate Name

Takano, Mark, , Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 41

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00498667

Transaction ID : 15450183

Amount of Each Disbursement this Period

2500.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Susan Davis For Congress

Mailing Address P.O. Box 84049

City San Diego State CA Zip Code 92138

Purpose of Disbursement

Category/
Type

Candidate Name
Davis, Susan, A., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: CA District: 53

Date of Disbursement
MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number
C C00344671
Transaction ID : 15450184
Amount of Each Disbursement this Period
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Blum For Congress

Mailing Address 2728 Asbury Road Suite 400

City Dubuque State IA Zip Code 52001

Purpose of Disbursement

Category/
Type

Candidate Name
Blum, Rod, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: IA District: 01

Date of Disbursement
MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number
C C00543926
Transaction ID : 15450185
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. King For Congress

Mailing Address PO Box 398
202 W 2nd St

City Wall Lake State IA Zip Code 51466

Purpose of Disbursement

Category/
Type

Candidate Name
King, Steve, A., Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General
 Other (specify) ▼
State: IA District: 04

Date of Disbursement
MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number
C C00373563
Transaction ID : 15450186
Amount of Each Disbursement this Period
2000.00

Memo Item

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

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

5000.00

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Kelly For Congress

Mailing Address 5221-A Cliff Gookin Blvd

City Tupelo State MS Zip Code 38801

Purpose of Disbursement

011

Category/
Type

Candidate Name

Kelly, Trent, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: MS District: 01

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00573980

Transaction ID : 15450187

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Greg For Montana

Mailing Address PO Box 877

City Helena State MT Zip Code 59624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Gianforte, Greg, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify)

State: MT District: 00

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00631945

Transaction ID : 15450188

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Amodei For Nevada

Mailing Address 503 N Division St

City Carson City State NV Zip Code 89703

Purpose of Disbursement

011

Category/
Type

Candidate Name

Amodei, Mark, E., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: NV District: 02

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C C00496760

Transaction ID : 15450189

Amount of Each Disbursement this Period

2000.00

Memo Item

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

5000.00

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

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

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Kaine For Virginia

Mailing Address 1751 Potomac Greens Drive

City Alexandria State VA Zip Code 22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Kaine, Tim, , Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00495358

Transaction ID : 15450190

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Donald Norcross For Congress

Mailing Address PO Box 160

City Collingswood State NJ Zip Code 08108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Norcross, Donald, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NJ District: 01

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00558320

Transaction ID : 15450191

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Cory Booker For Senate

Mailing Address PO Box 15293

City Washington State DC Zip Code 20003

Purpose of Disbursement

011

Category/
Type

Candidate Name

Booker, Cory, A., Sen.,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NJ District:

Date of Disbursement

MM / DD / YYYY
05 / 10 / 2018

FEC Identification Number

C00540500

Transaction ID : 15450192

Amount of Each Disbursement this Period

500.00

Memo Item

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

6500.00

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

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

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Pittenger For Congress Llc

Mailing Address PO Box 11207

City
Charlotte

State
NC

Zip Code
28220

Purpose of Disbursement
Void - Pittenger For Congress Llc

011

Category/
Type

Candidate Name

Pittenger, Robert, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: NC District: 09

Date of Disbursement

MM / DD / YYYY
05 / 14 / 2018

FEC Identification Number

C00514513

Transaction ID : 15450281

Amount of Each Disbursement this Period

- 2000.00

Void - Pittenger For Congress Llc

Memo Item

Full Name (Last, First, Middle Initial)

B. Lance For Congress

Mailing Address PO Box 999

City
Edison

State
NJ

Zip Code
08818

Purpose of Disbursement
Void - Lance For Congress

011

Category/
Type

Candidate Name

Lance, Leonard, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify)

State: NJ District: 07

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C00444224

Transaction ID : 15450283

Amount of Each Disbursement this Period

- 3500.00

Void - Lance For Congress

Memo Item

Full Name (Last, First, Middle Initial)

C. Richard E Neal For Congress Committee

Mailing Address 76 Magnolia Terrace

City
Springfield

State
MA

Zip Code
01108

Purpose of Disbursement

011

Category/
Type

Candidate Name

Neal, Richard, E., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: MA District: 01

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C00226522

Transaction ID : 15450284

Amount of Each Disbursement this Period

3000.00

Memo Item

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

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

- 2500.00

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

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

FOR LINE NUMBER:
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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Greg For Montana

Mailing Address PO Box 877

City
Helena

State
MT

Zip Code
59624

Purpose of Disbursement

011

Category/
Type

Candidate Name

Gianforte, Greg, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: MT District: 00

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00631945

Transaction ID : 15450287

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Zeldin For Congress

Mailing Address 47 Flintlock Drive

City
Shirley

State
NY

Zip Code
11967

Purpose of Disbursement

011

Category/
Type

Candidate Name

Zeldin, Lee, M., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NY District: 01

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00552547

Transaction ID : 15450288

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Don Beyer

Mailing Address 1751 Potomac Greens Drive

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement

011

Category/
Type

Candidate Name

Beyer, Don, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: VA District: 08

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00555888

Transaction ID : 15450289

Amount of Each Disbursement this Period

4000.00

Memo Item

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

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

8500.00

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

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Sean Patrick Maloney For Congress

Mailing Address PO Box 270

City
Newburgh

State
NY

Zip Code
12550

Purpose of Disbursement

011

Category/
Type

Candidate Name

Maloney, Sean, Patrick, Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C00512426

Transaction ID : 15450290

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Sean Patrick Maloney For Congress

Mailing Address PO Box 270

City
Newburgh

State
NY

Zip Code
12550

Purpose of Disbursement

011

Category/
Type

Candidate Name

Maloney, Sean, Patrick, Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NY District: 18

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C00512426

Transaction ID : 15450291

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Pascrell For Congress

Mailing Address Pob 100

City
Teaneck

State
NJ

Zip Code
07666

Purpose of Disbursement

011

Category/
Type

Candidate Name

Pascrell, William, J., Rep., Jr.

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NJ District: 09

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C00313510

Transaction ID : 15450292

Amount of Each Disbursement this Period

1500.00

Memo Item

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

4000.00

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

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

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FOR LINE NUMBER:
(check only one)

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<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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Ted Cruz For Senate

Mailing Address 815 A Brazos
Pmb 550

City Austin State TX Zip Code 78701

Purpose of Disbursement

Category/
Type

Candidate Name
Cruz, Ted, , Sen.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: TX District:

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number
C C00492785
Transaction ID : 15450294
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of John Barrasso

Mailing Address PO Box 52008

City Casper State WY Zip Code 82605

Purpose of Disbursement

Category/
Type

Candidate Name
Barrasso, John, A., Sen., MD

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: WY District:

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number
C C00436386
Transaction ID : 15450296
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Mailing Address PO Box 999

City Edison State NJ Zip Code 08818

Purpose of Disbursement

Category/
Type

Candidate Name
Lance, Leonard, , Rep.,

Office Sought: House Senate President
Disbursement For: 2018
 Primary General Other (specify) ▼
State: NJ District: 07

Date of Disbursement
MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number
C C00444224
Transaction ID : 15450298
Amount of Each Disbursement this Period
3500.00

Memo Item

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

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

10000.00

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

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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Wicker For Senate

Mailing Address PO Box 64

City Jackson State MS Zip Code 39205

Purpose of Disbursement

011

Category/Type

Candidate Name

Wicker, Roger, F., Sen.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: MS District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00443218

Transaction ID : 15450299

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Randy Hultgren For Congress

Mailing Address PO Box 717

City St Charles State IL Zip Code 60174

Purpose of Disbursement

011

Category/Type

Candidate Name

Hultgren, Randy, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: IL District: 14

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00467522

Transaction ID : 15450300

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Cleaver For Congress

Mailing Address 4801 Main Street, Suite 1000

City Kansas City State MO Zip Code 64112

Purpose of Disbursement

011

Category/Type

Candidate Name

Cleaver, Emanuel, , Rep., II

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: MO District: 05

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2018

FEC Identification Number

C C00395848

Transaction ID : 15450400

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

**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 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Chuck Fleischmann For Congress Committee, Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	8

Mailing Address P.O. Box 11091

FEC Identification Number

C	C00461822
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Transaction ID : 15450411

Amount of Each Disbursement this Period

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

Memo Item

City

Chattanooga

State

TN

Zip Code

37401

Purpose of Disbursement

011

Category/
Type

Candidate Name

Fleischmann, Chuck, J., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: TN

District: 03

Full Name (Last, First, Middle Initial)

B. Buck For Colorado

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	8

Mailing Address P.O. Box 338018

FEC Identification Number

C	C00461368
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Transaction ID : 15462841

Amount of Each Disbursement this Period

1	0	0	0	0	0
---	---	---	---	---	---

Memo Item

City

Greeley

State

CO

Zip Code

80633

Purpose of Disbursement

011

Category/
Type

Candidate Name

Buck, Ken, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CO

District: 04

Full Name (Last, First, Middle Initial)

C. Coffman For Congress 2018

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	8

Mailing Address 4950 S Yosemite Street F2 #511

FEC Identification Number

C	C00629287
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Transaction ID : 15462842

Amount of Each Disbursement this Period

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

Memo Item

City

Greenwood Village

State

CO

Zip Code

80111

Purpose of Disbursement

011

Category/
Type

Candidate Name

Coffman, Mike, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CO

District: 06

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

5	0	0	0	0	0
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TOTAL This Period (last page this line number only)..... ▶

5	0	0	0	0	0
---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Dina Titus For Congress

Mailing Address PO Box 50614

City
Henderson

State
NV

Zip Code
89016

Purpose of Disbursement

011

Category/
Type

Candidate Name

Titus, Dina, Constadina, Rep.,

Office Sought:

 House
 Senate
 President

Disbursement For: 2018

 Primary General
 Other (specify) ▼

State: NV

District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	8		2	0	1	8		

FEC Identification Number

C C00450577

Transaction ID : 15462843

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Don Payne For Congress

Mailing Address PO Box 2406

City
Newark

State
NJ

Zip Code
07114

Purpose of Disbursement

011

Category/
Type

Candidate Name

Payne, Donald, M., Rep.,

Office Sought:

 House
 Senate
 President

Disbursement For: 2018

 Primary General
 Other (specify) ▼

State: NJ

District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	8		2	0	1	8		

FEC Identification Number

C C00225045

Transaction ID : 15462844

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Loeb sack For Congress

Mailing Address PO Box 3013

City
Iowa City

State
IA

Zip Code
52244

Purpose of Disbursement

011

Category/
Type

Candidate Name

Loeb sack, David, Wayne, Rep.,

Office Sought:

 House
 Senate
 President

Disbursement For: 2018

 Primary General
 Other (specify) ▼

State: IA

District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	5		1	8		2	0	1	8		

FEC Identification Number

C C00414318

Transaction ID : 15462845

Amount of Each Disbursement this Period

3500.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Duncan D. Hunter For Congress

Mailing Address PO Box 1545

City El Cajon State CA Zip Code 92022

Purpose of Disbursement

Category/
Type

Candidate Name

Hunter, Duncan, Duane, Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: CA District: 50

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463269

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Matsui For Congress

Mailing Address PO Box 1738

City Sacramento State CA Zip Code 95812

Purpose of Disbursement

Category/
Type

Candidate Name

Matsui, Doris, , Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: CA District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463270

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mike Thompson For Congress

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement

Category/
Type

Candidate Name

Thompson, Mike, , Rep.,

Office Sought: House Senate President
 Disbursement For: 2018 Primary General Other (specify) ▼
 State: CA District: 05

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463271

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Mark Desaulnier For Congress

Mailing Address PO Box 6066

City Concord State CA Zip Code 94524

Purpose of Disbursement

011

Category/
Type

Candidate Name

DeSaulnier, Mark, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 11

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00554709

Transaction ID : 15463272

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Schiff For Congress

Mailing Address 777 S. Figueroa Street, Suite 4050

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement

011

Category/
Type

Candidate Name

Schiff, Adam, B., Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 28

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00343871

Transaction ID : 15463273

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Walters For Congress

Mailing Address 9070 Irvine Center Drive, #150

City Irvine State CA Zip Code 92618

Purpose of Disbursement

011

Category/
Type

Candidate Name

Walters, Mimi, , Rep.,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: CA District: 45

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00546853

Transaction ID : 15463274

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Scott Peters For Congress

Mailing Address PO Box 22074

City
San Diego

State
CA

Zip Code
92192

Purpose of Disbursement

011

Category/
Type

Candidate Name

Peters, Scott, Harvey, Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CA

District: 52

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00503110

Transaction ID : 15463275

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Young For Iowa, Inc.

Mailing Address PO Box 162

City
Van Meter

State
IA

Zip Code
50261

Purpose of Disbursement

011

Category/
Type

Candidate Name

Young, David, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: IA

District: 03

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00545616

Transaction ID : 15463276

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. People For Ben

Mailing Address PO Box 31129

City
Santa Fe

State
NM

Zip Code
87594

Purpose of Disbursement

011

Category/
Type

Candidate Name

Lujan, Ben, Ray, Rep., Jr.

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: NM

District: 03

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00443689

Transaction ID : 15463277

Amount of Each Disbursement this Period

1500.00

Memo Item

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

5500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Rob Bishop For Congress

Mailing Address PO Box 1776

City Brigham City State UT Zip Code 84302

Purpose of Disbursement

Category/Type

Candidate Name

Bishop, Rob, , Rep.,

Office Sought: House Senate President
State: UT District: 01

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463278

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends For Chris Stewart, Inc.

Mailing Address PO Box 540370

City North Salt Lake State UT Zip Code 84054

Purpose of Disbursement

Category/Type

Candidate Name

Stewart, Chris, , Rep.,

Office Sought: House Senate President
State: UT District: 02

Disbursement For: 2018
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463279

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Morgan Griffith For Congress

Mailing Address PO Box 361

City Christiansburg State VA Zip Code 24068

Purpose of Disbursement

Category/Type

Candidate Name

Griffith, Morgan, H., Rep.,

Office Sought: House Senate President
State: VA District: 09

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : 15463280

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Comstock For Congress

Mailing Address PO Box 831

City
Mc Lean

State
VA

Zip Code
22101

Purpose of Disbursement

011

Category/
Type

Candidate Name

Comstock, Barbara, J., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: VA

District: 10

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00554261

Transaction ID : 15463281

Amount of Each Disbursement this Period

2000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Palazzo For Congress

Mailing Address P.O. Box 6217

City
Gulfport

State
MS

Zip Code
39506

Purpose of Disbursement

011

Category/
Type

Candidate Name

Palazzo, Steven, M., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify)

State: MS

District: 04

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00477323

Transaction ID : 15463282

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Connolly For Congress

Mailing Address PO Box 563

City
Merrifield

State
VA

Zip Code
22116

Purpose of Disbursement

011

Category/
Type

Candidate Name

Connolly, Gerald, E., Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: VA

District: 11

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2018

FEC Identification Number

C00445452

Transaction ID : 15463283

Amount of Each Disbursement this Period

1000.00

Memo Item

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Jeff Duncan For Congress

Mailing Address PO Box 845

City
Laurens

State
SC

Zip Code
29360

Purpose of Disbursement

011

Category/
Type

Candidate Name

Duncan, Jeff, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: SC District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	8

FEC Identification Number

C C00460550

Transaction ID : 15463284

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
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Memo Item

Full Name (Last, First, Middle Initial)

B. Joe Wilson For Congress

Mailing Address PO Box 2145

City
West Columbia

State
SC

Zip Code
29171

Purpose of Disbursement

011

Category/
Type

Candidate Name

Wilson, Joe, , Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: SC District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	8

FEC Identification Number

C C00368522

Transaction ID : 15463285

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Vargas For Congress

Mailing Address 330 Encinitas Blvd., Suite 101

City
Encinitas

State
CA

Zip Code
92024

Purpose of Disbursement

011

Category/
Type

Candidate Name

Vargas, Juan, C., Rep.,

Office Sought: House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CA District: 51

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	1	8

FEC Identification Number

C C00497321

Transaction ID : 15463301

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Memo Item

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

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

5	0	0	0	0	0	0	0	0	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input 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 Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Friends Of Dave Brat Inc.

Mailing Address PO Box 5094

City: Glen Allen State: VA Zip Code: 23058

Purpose of Disbursement

011

Category/Type

Candidate Name

Brat, Dave, , Rep.,

Office Sought: House Senate President
State: VA District: 07

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C00554949

Transaction ID : 15464368

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Jim Clyburn

Mailing Address Post Office Box 12567

City: Columbia State: SC Zip Code: 29211

Purpose of Disbursement

011

Category/Type

Candidate Name

Clyburn, James, E., Rep.,

Office Sought: House Senate President
State: SC District: 06

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C00255562

Transaction ID : 15464369

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Sanford For Congress

Mailing Address P. O. Box 160

City: Sullivans Island State: SC Zip Code: 29482

Purpose of Disbursement

011

Category/Type

Candidate Name

Sanford, Mark, , Rep., Jr.

Office Sought: House Senate President
State: SC District: 01

Disbursement For: 2018
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2018

FEC Identification Number

C00285254

Transaction ID : 15464370

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

National Association of Insurance and Financial Advisors Political Action Comm

Full Name (Last, First, Middle Initial)

A. Walters For Congress

Mailing Address 9070 Irvine Center Drive, #150

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

City
Irvine

State
CA

Zip Code
92618

FEC Identification Number

C	C00546853
---	-----------

Transaction ID : 15464371

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

011

Category/
Type

Candidate Name

Walters, Mimi, , Rep.,

Office Sought:

House
 Senate
 President

Disbursement For: 2018

Primary General
 Other (specify) ▼

State: CA

District: 45

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

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

City

State

Zip Code

FEC Identification Number

C	
---	--

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Memo Item

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

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

1000.00

168500.00
