

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

DEFENDERS OF FREEDOM AND SECURITY

ADDRESS (number and street) 8139 SUNSET AVE #130

Check if different than previously reported. (ACC) FAIR OAKS CA 95628

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

C C00536664

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

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

Election on M M / D D / Y Y Y Y Y Y in the State of

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

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 04 / 01 / 2020 through M M / D D / Y Y Y Y Y Y 06 / 30 / 2020

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

Hornaday, Alexander, , ,

Type or Print Name of Treasurer

Signature of Treasurer Hornaday, Alexander, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 07 / 15 / 2020

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

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

DEFENDERS OF FREEDOM AND SECURITY

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="2020"/>	<input type="text" value="9740.07"/>	<input type="text" value="9740.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="10976.04"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="20218.63"/>	<input type="text" value="44900.74"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="31194.67"/>	<input type="text" value="54640.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10846.81"/>	<input type="text" value="34292.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="20347.86"/>	<input type="text" value="20347.86"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

DEFENDERS OF FREEDOM AND SECURITY

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).....	3889.00	8064.00
(ii) Unitemized	16329.63	36836.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20218.63	44900.74
(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)	20218.63	44900.74
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	20218.63	44900.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20218.63	44900.74

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5411.81	13702.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5411.81	13702.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	1750.00
24. Independent Expenditures (use Schedule E)	4935.00	18840.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10846.81	34292.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10846.81	34292.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20218.63	44900.74
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20218.63	44900.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5411.81	13702.95
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5411.81	13702.95

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Bell, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11812 N 110th St
 City Scottsdale State AZ Zip Code 85259-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2020
Transaction ID : SA11AI.7654
 Amount of Each Receipt this Period 100.00
 Memo Item
 Independent expenditures

B. Bell, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11812 N 110th St
 City Scottsdale State AZ Zip Code 85259-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 04 / 14 / 2020
Transaction ID : SA11AI.7662
 Amount of Each Receipt this Period 100.00
 Memo Item
 Independent expenditures

C. Bell, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11812 N 110th St
 City Scottsdale State AZ Zip Code 85259-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2020
Transaction ID : SA11AI.7549
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Bell, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11812 N 110th St
 City Scottsdale State AZ Zip Code 85259-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 12 / 2020
Transaction ID : SA11AI.7573
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

B. Crawford, Albert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 E mayo Blvd Unit 29101
 City Phoenix State AZ Zip Code 85050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ret Occupation (for Individual) ret
 Receipt For: 2020
 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 / 13 / 2020
Transaction ID : SA11AI.7578
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

C. goldman, beryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3610 lindenwood Ave
 City dallas State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) pcms Occupation (for Individual) president
 Receipt For: 2020
 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
 04 / 16 / 2020
Transaction ID : SA11AI.7723
 Amount of Each Receipt this Period 250.00
 Memo Item
 Independent expenditures

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 8 OF 23
<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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DEFENDERS OF FREEDOM AND SECURITY

A. Hoggatt, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20713 Mystic Way
 City North Fort Myers State FL Zip Code 33917
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 04 / 06 / 2020
Transaction ID : SA11AI.7650
 Amount of Each Receipt this Period 100.00
 Memo Item
 Independent expenditures

B. Lewit, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 Kendal Way
 City Sleepy Hollow State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 06 / 03 / 2020
Transaction ID : SA11AI.7608
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

C. Londal, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 Crooked Tree Dr
 City Petoskey State MI Zip Code 49770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 04 / 09 / 2020
Transaction ID : SA11AI.7523
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	200.00
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 9 OF 23
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Londal, Gerald, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 818 Crooked Tree Dr

City Petoskey	State MI	Zip Code 49770
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2020

Transaction ID : SA11AI.7553

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

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

Mailing Address 818 Crooked Tree Dr

City Petoskey	State MI	Zip Code 49770
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 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	/	15	/	2020

Transaction ID : SA11AI.7581

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

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

Mailing Address 15180 W 50th Dr

City Golden	State CO	Zip Code 80403
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) bounce inc	Occupation (for Individual) CPO
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Receipt For: 2020
 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	/	01	/	2020

Transaction ID : SA11AI.7725

Amount of Each Receipt this Period
250.00

Memo Item
Independent expenditures

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: PAGE 10 OF 23
(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)
DEFENDERS OF FREEDOM AND SECURITY

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

Mailing Address 15180 W 50th Dr

City Golden	State CO	Zip Code 80403
----------------	-------------	-------------------

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

Name of Employer (for Individual) bounce inc	Occupation (for Individual) CPO
---	------------------------------------

Receipt For: 2020
 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	/	12	/	2020

Transaction ID : SA11AI.7726

Amount of Each Receipt this Period
250.00

Memo Item
Independent expenditures

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

Mailing Address 227 N Lucerne Blvd

City Los Angeles	State CA	Zip Code 90004
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 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
04	/	11	/	2020

Transaction ID : SA11AI.7718

Amount of Each Receipt this Period
150.00

Memo Item
Independent expenditures

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

Mailing Address 227 N Lucerne Blvd

City Los Angeles	State CA	Zip Code 90004
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
409.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2020

Transaction ID : SA11AI.7721

Amount of Each Receipt this Period
159.00

Memo Item
Independent expenditures

SUBTOTAL of Receipts This Page (optional).....▶	559.00
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 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. piziali, rita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 Deep Springs Ln
 City Lincoln State CA Zip Code 95648
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 19 / 2020
Transaction ID : SA11AI.7323
 Amount of Each Receipt this Period 25.00
 Memo Item
 Independent expenditures

B. Pogodzinski, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 Manitou Pk Dr
 City Minocqua State WI Zip Code 54548
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 29 / 2020
Transaction ID : SA11AI.7561
 Amount of Each Receipt this Period 50.00
 Memo Item
 Independent expenditures

C. ricci, lawrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address box 3803
 City san angelo State TX Zip Code 76902
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 18 / 2020
Transaction ID : SA11AI.7691
 Amount of Each Receipt this Period 100.00
 Memo Item
 Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	175.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ricci, lawrence, , ,

Mailing Address box 3803

City san angelo State TX Zip Code 76902

FEC ID number of contributing federal political committee. C

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2020

Transaction ID : SA11AI.7593

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

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

Mailing Address box 3803

City san angelo State TX Zip Code 76902

FEC ID number of contributing federal political committee. C

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2020

Transaction ID : SA11AI.7694

Amount of Each Receipt this Period
100.00

Memo Item
Independent expenditures

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

Mailing Address box 3803

City san angelo State TX Zip Code 76902

FEC ID number of contributing federal political committee. C

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
05 / 30 / 2020

Transaction ID : SA11AI.7604

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	200.00
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 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. ricci, lawrence, , ,

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 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
06		08		2020

Transaction ID : SA11AI.7629

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

B. ricci, lawrence, , ,

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2020

Transaction ID : SA11AI.7641

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

C. robertson, Steve, , ,

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

Mailing Address 12080 Kate Dr

City Los Altos	State CA	Zip Code 94022
-------------------	-------------	-------------------

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

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

Receipt For: 2020
 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
04		24		2020

Transaction ID : SA11AI.7680

Amount of Each Receipt this Period
100.00

Memo Item
Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	200.00
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 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. robertson, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12080 Kate Dr
 City Los Altos State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 06 / 11 / 2020
Transaction ID : SA11AI.7714
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Independent expenditures

B. Ryman, Jerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5174 Calzado
 City laguna Woods State CA Zip Code 92637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 04 / 20 / 2020
Transaction ID : SA11AI.7225
 Amount of Each Receipt this Period
 25.00
 Memo Item
 Independent expenditures

C. Speights, James W, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 Bent Oak
 City Shavano Park State TX Zip Code 78231
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 06 / 11 / 2020
Transaction ID : SA11AI.7730
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Independent expenditures

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 15 OF 23
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Stitt, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 43 Corte Morada
 City Greenbrae State CA Zip Code 94904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 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 / 2020
Transaction ID : SA11AI.7728
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Independent expenditures

B. sweatt, nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3087
 City santa cruz State CA Zip Code 95063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) retatty
 Receipt For: 2020
 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
 04 / 06 / 2020
Transaction ID : SA11AI.7516
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Independent expenditures

C. sweatt, nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3087
 City santa cruz State CA Zip Code 95063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) retatty
 Receipt For: 2020
 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
 04 / 16 / 2020
Transaction ID : SA11AI.7542
 Amount of Each Receipt this Period
 50.00
 Memo Item
 Independent expenditures

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:	PAGE 16 OF 23
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sweatt, nancy, , ,

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 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
04		24		2020

Transaction ID : SA11AI.7245

Amount of Each Receipt this Period
25.00

Memo Item
Independent expenditures

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 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		21		2020

Transaction ID : SA11AI.7333

Amount of Each Receipt this Period
25.00

Memo Item
Independent expenditures

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2020

Transaction ID : SA11AI.7484

Amount of Each Receipt this Period
30.00

Memo Item
Independent expenditures

SUBTOTAL of Receipts This Page (optional).....	80.00
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 17 OF 23
(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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sweatt, nancy, , ,

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	16	/	2020

Transaction ID : SA11Al.7638

Amount of Each Receipt this Period
50.00

Memo Item
Independent expenditures

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

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	3889.00

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

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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Moundsprings Strategies

Mailing Address 8208 Foxfire Dr

City Orangevale State CA Zip Code 95662

Purpose of Disbursement
PAC Management Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 27 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7742
Amount of Each Disbursement this Period
3340.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 01 / 2020

FEC Identification Number

C
Transaction ID : SB21B.6905
Amount of Each Disbursement this Period
10.24

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 21 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7749
Amount of Each Disbursement this Period
224.73

Memo Item

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

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

3574.97

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Merchant Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 01 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7750
Amount of Each Disbursement this Period
57.53

Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Merchant Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 26 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7751
Amount of Each Disbursement this Period
148.04

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Merchant Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7752
Amount of Each Disbursement this Period
131.27

Memo Item

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

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

336.84

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)
A. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street
Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement LEgal and Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 20 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7743

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)
B. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street
Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement Legal and Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 07 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7744

Amount of Each Disbursement this Period: 500.00

Memo Item

Full Name (Last, First, Middle Initial)
C. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street
Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement Legal and compliancce

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 09 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7745

Amount of Each Disbursement this Period: 500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1500.00

TOTAL This Period (last page this line number only)..... ▶ 5411.81

**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)
DEFENDERS OF FREEDOM AND SECURITY

A. Mike Garcia for Congress

Full Name (Last, First, Middle Initial)

Mailing Address 1451 Quail Street
Ste 101

City NEWport Beach State CA Zip Code 92660

Purpose of Disbursement Contribution

Candidate Name
Mike Garcia for Congress

Office Sought: House Senate President
State: CA District: 25

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 04 / 29 / 2020

FEC Identification Number: C00701102
Transaction ID : SB23.7733

Amount of Each Disbursement this Period: 500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

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

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Video Editing
Name of Federal Candidate: MCSALLY, MARTHA, , Support
Office Sought: Senate State: AZ
Disbursement For: Other (specify) Special-Primary
Amount 2100.00
Transaction ID: SE.7736
Date of Disbursement or Obligation 05/01/2020

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure List rental and Email fees
Name of Federal Candidate: MCSALLY, MARTHA, , Support
Office Sought: Senate State: AZ
Disbursement For: Other (specify) Special-Primary
Amount 1650.00
Transaction ID: SE.7737
Date of Disbursement or Obligation 05/01/2020

(a) SUBTOTAL of Itemized Independent Expenditures 3750.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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

Hornaday, Alexander, ,

[Electronically Filed]

Date 07/15/2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

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

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Digital advertising
Name of Federal Candidate: MCSALLY, MARTHA, , , Support
Calendar Year-To-Date Per Election for Office Sought 4935.00
Disbursement For: Other (specify) Special-Primary

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 1185.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 4935.00

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

Hornaday, Alexander, , ,

[Electronically Filed]

Date 07 / 15 / 2020

Signature