

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 REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 72598 NEWPORT KY 41072 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00493924 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 / 01 / 2018 through 09 / 30 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. BROGHAMER, KEVIN, , , Type or Print Name of Treasurer

Signature of Treasurer BROGHAMER, KEVIN, , , [Electronically Filed] Date 01 / 17 / 2019

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

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

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"/>		222537.29
(b) Cash on Hand at Beginning of Reporting Period.....	221491.51	
(c) Total Receipts (from Line 19) .....	111527.71	503241.67
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	333019.22	725778.96
7. Total Disbursements (from Line 31).....	179315.00	572074.74
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	153704.22	153704.22
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

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).....	51709.00	278655.76
(ii) Unitemized .....	29110.68	163338.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	80819.68	441994.38
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	30500.00	46500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	111319.68	488494.38
12. Transfers From Affiliated/Other Party Committees.....	0.00	11855.53
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).....	155.12	2751.09
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	52.91	140.67
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)).....▶	111527.71	503241.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	111527.71	503241.67

**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 .....	152155.01	480274.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	152155.01	480274.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	20000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	22500.00
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 .....	11909.99	39049.99
(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)).....	11909.99	39049.99
29. Other Disbursements (Including Non-Federal Donations).....	10250.00	10250.00
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)) ..	179315.00	572074.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	179315.00	572074.74

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	111319.68	488494.38
34. Total Contribution Refunds (from Line 28(d)) .....	11909.99	39049.99
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	99409.69	449444.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	152155.01	480274.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	155.12	2751.09
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	151999.89	477523.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 219
	<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

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. ANDERSON, DIANE, D, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 W RIVER HEIGHTS DR  
 City MERIDIAN State ID Zip Code 83646-5122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt **08 / 17 / 2018**  
**Transaction ID : SA11A.763227**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**B. BASHAM, BRIAN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1613 HIGH MEADOWS DR.  
 City NORMAN State OK Zip Code 73071-7428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHWEST ELECTRIC CO Occupation (for Individual) DRAFTSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **09 / 04 / 2018**  
**Transaction ID : SA11A.763566**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. BASHAM, BRIAN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1613 HIGH MEADOWS DR.  
 City NORMAN State OK Zip Code 73071-7428  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SOUTHWEST ELECTRIC CO Occupation (for Individual) DRAFTSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt **09 / 11 / 2018**  
**Transaction ID : SA11A.763691**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	250.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BAUGHMAN, JOANN, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1269

City PHILOMATH	State OR	Zip Code 97370-1269
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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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 26 / 2018

**Transaction ID : SA11A.763415**

Amount of Each Receipt this Period  
36.00

Memo Item CONTRIBUTION

**B. BAUGHMAN, JOANN, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1269

City PHILOMATH	State OR	Zip Code 97370-1269
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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:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
09 / 04 / 2018

**Transaction ID : SA11A.763559**

Amount of Each Receipt this Period  
44.00

Memo Item CONTRIBUTION

**C. BAUGHMAN, JOANN, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1269

City PHILOMATH	State OR	Zip Code 97370-1269
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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:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
249.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
08 / 21 / 2018

**Transaction ID : SA11A.763988**

Amount of Each Receipt this Period  
41.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	121.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BELL, RICHARD, LEWIS, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13856 NW 14TH ST

City PEMBROKE PINES	State FL	Zip Code 33028-3031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTH FLORIDA CONSTRUCTION SYSTEMS	Occupation (for Individual) CONSTRUCTION
-------------------------------------------------------------------------	---------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2018

**Transaction ID : SA11A.762618**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B. BELL, RICHARD, LEWIS, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13856 NW 14TH ST

City PEMBROKE PINES	State FL	Zip Code 33028-3031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTH FLORIDA CONSTRUCTION SYSTEMS	Occupation (for Individual) CONSTRUCTION
-------------------------------------------------------------------------	---------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

**Transaction ID : SA11A.762852**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C. BELL, RICHARD, LEWIS, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13856 NW 14TH ST

City PEMBROKE PINES	State FL	Zip Code 33028-3031
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SOUTH FLORIDA CONSTRUCTION SYSTEMS	Occupation (for Individual) CONSTRUCTION
-------------------------------------------------------------------------	---------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2018

**Transaction ID : SA11A.763571**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BENNETT, RICKY, SMITH, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5614 101ST ST  
 City LUBBOCK State TX Zip Code 79424-6290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL AND GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 29 / 2018  
**Transaction ID : SA11A.763526**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. BENNETT, RICKY, SMITH, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5614 101ST ST  
 City LUBBOCK State TX Zip Code 79424-6290  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL AND GAS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 21 / 2018  
**Transaction ID : SA11A.764023**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. BENTLEY, THOMAS, R, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15869 COUNTY ROAD 605  
 City FARMERSVILLE State TX Zip Code 75442-6609  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RANCHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 14 / 2018  
**Transaction ID : SA11A.763712**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	175.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BENTLEY, THOMAS, R, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15869 COUNTY ROAD 605

City FARMERSVILLE	State TX	Zip Code 75442-6609
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) RANCHER
----------------------------------------------------	----------------------------------------

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
09		14		2018

**Transaction ID : SA11A.763713**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B. BISHOP, ROBERT, J., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 66 MIDDLE RD

City PALM BEACH	State FL	Zip Code 33480-4712
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) IMPALA ASSET MANAGEMENT	Occupation (for Individual) PRINCIPAL
--------------------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2018

**Transaction ID : SA11A.762820**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. BRANDT, ALAN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address KLOTENERSTRASSE 3

City DIETLIKON	State ZH	Zip Code 08305-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) MARKETING
----------------------------------------------------	------------------------------------------

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
08		17		2018

**Transaction ID : SA11A.763078**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5075.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BUGG, STUART, EDWARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 S BLUE ANGEL PKWY

City PENSACOLA	State FL	Zip Code 32506-6045
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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:  
 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
07		01		2018

**Transaction ID : SA11A.762590**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**B. BUGG, STUART, EDWARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 S BLUE ANGEL PKWY

City PENSACOLA	State FL	Zip Code 32506-6045
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

**Transaction ID : SA11A.762732**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**C. BUGG, STUART, EDWARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 S BLUE ANGEL PKWY

City PENSACOLA	State FL	Zip Code 32506-6045
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2018

**Transaction ID : SA11A.763500**

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 219
	<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

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BUIE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 904 LAZY BRANCH DR.  
 City BENSON State NC Zip Code 27504-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2018  
**Transaction ID : SA11A.762795**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. BUIE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 904 LAZY BRANCH DR.  
 City BENSON State NC Zip Code 27504-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2018  
**Transaction ID : SA11A.763099**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**C. BUIE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 904 LAZY BRANCH DR.  
 City BENSON State NC Zip Code 27504-6014  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2018  
**Transaction ID : SA11A.763768**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 219
	<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

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BURNETT, PETER, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3744 S LEISURE WORLD BLVD  
 City SILVER SPRING State MD Zip Code 20906-1502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 10 / 2018**  
**Transaction ID : SA11A.762560**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. BURNETT, PETER, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3744 S LEISURE WORLD BLVD  
 City SILVER SPRING State MD Zip Code 20906-1502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **08 / 10 / 2018**  
**Transaction ID : SA11A.762832**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. BURNETT, PETER, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3744 S LEISURE WORLD BLVD  
 City SILVER SPRING State MD Zip Code 20906-1502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **08 / 19 / 2018**  
**Transaction ID : SA11A.763196**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. BURNETT, PETER, G, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3744 S LEISURE WORLD BLVD  
 City SILVER SPRING State MD Zip Code 20906-1502  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : SA11A.763572**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. BURROW, SAMUEL, JACK, DR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5118 CHILLMARK RD  
 City CHARLOTTE State NC Zip Code 28226-6472  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ORTHODONTIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 26 / 2018  
**Transaction ID : SA11A.763403**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. BUTLER, MICHAEL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2700 CRESCENT SPRINGS PIKE  
 City FORT MITCHELL State KY Zip Code 41017-1523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SIGNATURE HARDWARE Occupation (for Individual) RETAIL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 08 / 19 / 2018  
**Transaction ID : SA11A.763240**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2350.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. CLISE, RICHARD, H., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1410 COUNTRY CLUB DR  
 City CAMANO ISLAND State WA Zip Code 98282-8314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763230**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. COOK, LEE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6105 WESTLINE DR  
 City HOUSTON State TX Zip Code 77036-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PHONOSCOPE Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 11 / 2018  
**Transaction ID : SA11A.762071**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item CONTRIBUTION  
 SEE REATTRIBUTION

**C. COOK, LEE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6105 WESTLINE DR  
 City HOUSTON State TX Zip Code 77036-3515  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PHONOSCOPE Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : SA11A.762693**  
 Amount of Each Receipt this Period - 5000.00  
 Memo Item CONTRIBUTION  
 REATTRIBUTION TO SPOUSE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 219
	<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	

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. COOK, SARAH, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6105 WESTLINE DR

City HOUSTON	State TX	Zip Code 77036-3515
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : SA11A.762692**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

REATTRIBUTION FROM SPOUSE

**B. COTTLE, DAVID, GEORGE, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5494 PHIANT

City SCHOOLCRAFT	State MI	Zip Code 49087-9414
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2018

**Transaction ID : SA11A.762708**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. COTTLE, DAVID, GEORGE, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5494 PHIANT

City SCHOOLCRAFT	State MI	Zip Code 49087-9414
---------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2018

**Transaction ID : SA11A.762982**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. COTTLE, DAVID, GEORGE, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5494 PHIANT  
 City SCHOOLCRAFT State MI Zip Code 49087-9414  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 205.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA11A.763758**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. DARLING, BRIAN, H., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4532 WINDSOR LN  
 City BETHESDA State MD Zip Code 20814-4725  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) LIBERTY GOVERNMENT AFFAIRS Occupation (for Individual) LOBBYIST/PR  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 1000.00

Date of Receipt 08 / 30 / 2018  
**Transaction ID : SA11A.763476**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. DELGADILLO, RAFAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1311  
 City LARAMIE State WY Zip Code 82073-1311  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date 250.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : SA11A.763806**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 1275.00  
**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 18 OF 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. DILWORTH, EVANGELINA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4007 MCCULLOUGH AVE # 472  
 City SAN ANTONIO State TX Zip Code 78212-2420  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : SA11A.762556**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION  
 REFUNDED \$5,000.00 ON 09/28/2018

**B. EDWARDS, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 355 S GRAND AVE  
 City LOS ANGELES State CA Zip Code 90071-1560  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LATHAM AND WATKINS Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : SA11A.763242**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item CONTRIBUTION

**C. FITZGERALD, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 474 ORENA CT  
 City CAMARILLO State CA Zip Code 93010-1846  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA11A.763813**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8100.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. FLETCHER, ROBERT, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3009 LIGHTHEART RD  
 City LOUISVILLE State KY Zip Code 40222-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IPCC CORP Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : SA11A.762588**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**B. FLETCHER, ROBERT, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3009 LIGHTHEART RD  
 City LOUISVILLE State KY Zip Code 40222-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IPCC CORP Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 08 / 05 / 2018  
**Transaction ID : SA11A.762730**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

**C. FLETCHER, ROBERT, W, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3009 LIGHTHEART RD  
 City LOUISVILLE State KY Zip Code 40222-6138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) IPCC CORP Occupation (for Individual) BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt 09 / 05 / 2018  
**Transaction ID : SA11A.763584**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 219
	<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	

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. GARRISON, EVAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4300 SE SAINT LUCIE BLVD  
 LOT 31  
 City STUART State FL Zip Code 34997-6841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2018  
**Transaction ID : SA11A.762770**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. GARRISON, EVAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4300 SE SAINT LUCIE BLVD  
 LOT 31  
 City STUART State FL Zip Code 34997-6841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 20 / 2018  
**Transaction ID : SA11A.763063**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**C. GARRISON, EVAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4300 SE SAINT LUCIE BLVD  
 LOT 31  
 City STUART State FL Zip Code 34997-6841  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 20 / 2018  
**Transaction ID : SA11A.763761**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. GOERTEL, WAYNE, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 PARK LN

City HOOKSETT	State NH	Zip Code 03106-2140
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2018

**Transaction ID : SA11A.762741**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B. GOERTEL, WAYNE, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 PARK LN

City HOOKSETT	State NH	Zip Code 03106-2140
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
09 / 07 / 2018

**Transaction ID : SA11A.763589**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

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

Mailing Address 5 CRANMER ROAD

City CAMBRIDGE	State UK	Zip Code CB39B-
-------------------	-------------	--------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) ATTORNEY/ACADEMIC
----------------------------------------------------	--------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 17 / 2018

**Transaction ID : SA11A.762653**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HALL, LORA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P O BOX 327

City THEDFORD	State NE	Zip Code 69166-0327
------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWEST PARTITIONS INC	Occupation (for Individual) OFFICE MANAGER
-------------------------------------------------------------	-----------------------------------------------

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
07		15		2018

**Transaction ID : SA11A.762571**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address P O BOX 327

City THEDFORD	State NE	Zip Code 69166-0327
------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWEST PARTITIONS INC	Occupation (for Individual) OFFICE MANAGER
-------------------------------------------------------------	-----------------------------------------------

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
07		01		2018

**Transaction ID : SA11A.762572**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address P O BOX 327

City THEDFORD	State NE	Zip Code 69166-0327
------------------	-------------	------------------------

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

Name of Employer (for Individual) MIDWEST PARTITIONS INC	Occupation (for Individual) OFFICE MANAGER
-------------------------------------------------------------	-----------------------------------------------

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
07		29		2018

**Transaction ID : SA11A.762713**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HALL, LORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O BOX 327  
 City THEDFORD State NE Zip Code 69166-0327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIDWEST PARTITIONS INC Occupation (for Individual) OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 08 / 12 / 2018  
**Transaction ID : SA11A.762838**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. HALL, LORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O BOX 327  
 City THEDFORD State NE Zip Code 69166-0327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIDWEST PARTITIONS INC Occupation (for Individual) OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 08 / 26 / 2018  
**Transaction ID : SA11A.763392**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. HALL, LORA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P O BOX 327  
 City THEDFORD State NE Zip Code 69166-0327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MIDWEST PARTITIONS INC Occupation (for Individual) OFFICE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 925.00

Date of Receipt 09 / 09 / 2018  
**Transaction ID : SA11A.763592**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HARMS, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 HASKINS RD  
 City BOWLING GREEN State OH Zip Code 43402-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY AT LAW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 09 / 11 / 2018  
**Transaction ID : SA11A.763680**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. HARMS, ROBERT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 HASKINS RD  
 City BOWLING GREEN State OH Zip Code 43402-2204  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY AT LAW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 21 / 2018  
**Transaction ID : SA11A.763982**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HARRIS, ANGELA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 201 S 3RD ST  
 City LA PORTE State TX Zip Code 77571-5009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED AIRLINES Occupation (for Individual) PAYABLE ACCOUNTING CLERK  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762655**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> 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 219
	<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	

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HARRIS, ANGELA, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 S 3RD ST

City LA PORTE	State TX	Zip Code 77571-5009
------------------	-------------	------------------------

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

Name of Employer (for Individual) UNITED AIRLINES	Occupation (for Individual) PAYABLE ACCOUNTING CLERK
------------------------------------------------------	---------------------------------------------------------

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
08		01		2018

**Transaction ID : SA11A.762806**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**B. HARRIS, ANGELA, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 S 3RD ST

City LA PORTE	State TX	Zip Code 77571-5009
------------------	-------------	------------------------

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

Name of Employer (for Individual) UNITED AIRLINES	Occupation (for Individual) PAYABLE ACCOUNTING CLERK
------------------------------------------------------	---------------------------------------------------------

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
09		01		2018

**Transaction ID : SA11A.763556**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. HARRILL, ANNE, F, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1227 WOODS HAVEN RD

City EVERGREEN	State CO	Zip Code 80439-4248
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2018

**Transaction ID : SA11A.762656**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HARRILL, ANNE, F, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1227 WOODS HAVEN RD

City EVERGREEN	State CO	Zip Code 80439-4248
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2018

**Transaction ID : SA11A.762807**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**B. HARRILL, ANNE, F, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1227 WOODS HAVEN RD

City EVERGREEN	State CO	Zip Code 80439-4248
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2018

**Transaction ID : SA11A.763557**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. HEAVIN, H., GARY, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 875 COUNTY ROAD 324

City GATESVILLE	State TX	Zip Code 76528-4382
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2018

**Transaction ID : SA11A.763782**

Amount of Each Receipt this Period  
5400.00

Memo Item  
CONTRIBUTION

SEE REATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5450.00
<b>TOTAL</b> 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 27 OF 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HEAVIN, DIANE, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 875 COUNTY ROAD 324

City GATESVILLE	State TX	Zip Code 76528-4382
--------------------	-------------	------------------------

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

Name of Employer (for Individual) CURVES INTERNATIONAL	Occupation (for Individual) FOUNDER
-----------------------------------------------------------	----------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2018

**Transaction ID : SA11A.763801**

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

REATTRIBUTION FROM SPOUSE

**B. HEAVIN, H., GARY, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 875 COUNTY ROAD 324

City GATESVILLE	State TX	Zip Code 76528-4382
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2018

**Transaction ID : SA11A.763802**

Amount of Each Receipt this Period  
- 5000.00

Memo Item CONTRIBUTION

REATTRIBUTION TO SPOUSE; REFUNDED \$400.00 ON 09/29/2018

**C. HELGESON, RANDI, J, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16485 ELLERDALE LN

City EDEN PRAIRIE	State MN	Zip Code 55346-1431
----------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2018

**Transaction ID : SA11A.763236**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HELYAR, CATHERINE, W, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 GRASSANO DR

City BRISTOL	State VT	Zip Code 05443-5310
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CURRENTLY NOT EMPLOYED	Occupation (for Individual) CURRENTLY NOT EMPLOYED
-------------------------------------------------------------	-------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2018

**Transaction ID : SA11A.762603**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

**B. HELYAR, CATHERINE, W, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 GRASSANO DR

City BRISTOL	State VT	Zip Code 05443-5310
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CURRENTLY NOT EMPLOYED	Occupation (for Individual) CURRENTLY NOT EMPLOYED
-------------------------------------------------------------	-------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		10		2018

**Transaction ID : SA11A.762848**

Amount of Each Receipt this Period  
20.00

Memo Item  
CONTRIBUTION

**C. HELYAR, CATHERINE, W, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 77 GRASSANO DR

City BRISTOL	State VT	Zip Code 05443-5310
-----------------	-------------	------------------------

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

Name of Employer (for Individual) CURRENTLY NOT EMPLOYED	Occupation (for Individual) CURRENTLY NOT EMPLOYED
-------------------------------------------------------------	-------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
265.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2018

**Transaction ID : SA11A.763036**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HIGGINS, MICHAEL, , DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 933 KIRKWOOD AVE  
 City NASHVILLE State TN Zip Code 37204-2648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VANDERBILT UNIVERSITY MEDICAL CENTER Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763231**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. HINES, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 HARROGATE LOOP N  
 City WESTERVILLE State OH Zip Code 43082-6331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACCENTURE Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762602**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. HINES, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 HARROGATE LOOP N  
 City WESTERVILLE State OH Zip Code 43082-6331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACCENTURE Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 01 / 2018  
**Transaction ID : SA11A.762745**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 219
	<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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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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HINES, GREGORY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 338 HARROGATE LOOP N  
 City WESTERVILLE State OH Zip Code 43082-6331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACCENTURE Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 01 / 2018  
**Transaction ID : SA11A.763509**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. HOFSHI, JEANNINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1093 HILLCREST VIEW LN  
 City FALLBROOK State CA Zip Code 92028-1672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : SA11A.762619**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. HOFSHI, JEANNINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1093 HILLCREST VIEW LN  
 City FALLBROOK State CA Zip Code 92028-1672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : SA11A.762620**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
HOFSHI, JEANNINE, , ,

Mailing Address 1093 HILLCREST VIEW LN

City FALLBROOK	State CA	Zip Code 92028-1672
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
775.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2018

**Transaction ID : SA11A.762768**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1093 HILLCREST VIEW LN

City FALLBROOK	State CA	Zip Code 92028-1672
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
775.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2018

**Transaction ID : SA11A.762769**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 1093 HILLCREST VIEW LN

City FALLBROOK	State CA	Zip Code 92028-1672
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
775.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2018

**Transaction ID : SA11A.763594**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 219
	<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

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. HOFSHI, JEANNINE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1093 HILLCREST VIEW LN  
 City FALLBROOK State CA Zip Code 92028-1672  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **775.00**

Date of Receipt **09 / 05 / 2018**  
**Transaction ID : SA11A.763595**  
 Amount of Each Receipt this Period **50.00**  
 Memo Item  
**CONTRIBUTION**

**B. HOVERSON, JOHN, F., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 23125 102ND PL W  
 City EDMONDS State WA Zip Code 98020-5134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **AVT LLC** Occupation (for Individual) **SALES**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **08 / 21 / 2018**  
**Transaction ID : SA11A.764046**  
 Amount of Each Receipt this Period **20.00**  
 Memo Item  
**CONTRIBUTION**

**C. HUMPHREYS, MARK, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5339 ALPHA RD STE 300  
 City DALLAS State TX Zip Code 75240-7307  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HUMPHREYS AND PARTNERS ARCHITECTS** Occupation (for Individual) **ENTREPRENEUR**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **08 / 19 / 2018**  
**Transaction ID : SA11A.763237**  
 Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>320.00</b>
<b>TOTAL</b> 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 219
	<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

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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. JENNINGS, PAUL, S., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 457  
 City KUTTAWA State KY Zip Code 42055-0457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 08 / 23 / 2018  
**Transaction ID : SA11A.763808**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. KEARNEY, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 BART GREEN DR  
 City JOHNSON CITY State TN Zip Code 37615-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : SA11A.762657**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. KEARNEY, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 BART GREEN DR  
 City JOHNSON CITY State TN Zip Code 37615-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : SA11A.763116**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. KEARNEY, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 233 BART GREEN DR  
 City JOHNSON CITY State TN Zip Code 37615-4612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : SA11A.763558**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. KEYSER, DALE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 417 HIGHFIELD LOOP  
 City MYRTLE BEACH State SC Zip Code 29579-3415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : SA11A.763215**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. KOGGE, HENRY, JOHN, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 263 MANDARIN CIR  
 City VACAVILLE State CA Zip Code 95687-3113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762758**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. KOGGE, HENRY, JOHN, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 263 MANDARIN CIR  
 City VACAVILLE State CA Zip Code 95687-3113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763048**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. KOGGE, HENRY, JOHN, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 263 MANDARIN CIR  
 City VACAVILLE State CA Zip Code 95687-3113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA11A.763756**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. LEE, EDWARD, SHOLONG, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1200 CHARLES DR.  
 City RENO State NV Zip Code 89509-2446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOZILLA Occupation (for Individual) SOFTWARE ENGINEER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : SA11A.762577**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 36 OF 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. LEPO, ROBERT, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 532 MORNINGHOME RD  
 City DANVILLE State CA Zip Code 94526-3612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) VENTURE CAPITALIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 18 / 2018  
**Transaction ID : SA11A.763735**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**B. MACPHEE, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4105E DUTCH CREEK RD  
 City PEKIN State IN Zip Code 47165-7080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TRANSPORT RVS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762739**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. MACPHEE, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4105E DUTCH CREEK RD  
 City PEKIN State IN Zip Code 47165-7080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TRANSPORT RVS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763020**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5050.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MACPHEE, ANGELA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4105E DUTCH CREEK RD  
 City PEKIN State IN Zip Code 47165-7080  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) TRANSPORT RVS  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA11A.763755**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. MARINACCI, VINCENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 747 TULIP LN  
 City ROCKFORD State IL Zip Code 61107-5233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EXELON GENERATION Occupation (for Individual) POWER PLANT OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762585**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. MARINACCI, VINCENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 747 TULIP LN  
 City ROCKFORD State IL Zip Code 61107-5233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EXELON GENERATION Occupation (for Individual) POWER PLANT OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2018  
**Transaction ID : SA11A.762729**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 125.00  
**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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MARINACCI, VINCENT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 747 TULIP LN  
 City ROCKFORD State IL Zip Code 61107-5233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EXELON GENERATION Occupation (for Individual) POWER PLANT OPERATOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2018  
**Transaction ID : SA11A.763496**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. MARTIN, CHARLES, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5300 AUSTRAL LOOP APT/SUITE  
 City AUSTIN State TX Zip Code 78739-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : SA11A.762589**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. MARTIN, CHARLES, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5300 AUSTRAL LOOP APT/SUITE  
 City AUSTIN State TX Zip Code 78739-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : SA11A.762844**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MARTIN, CHARLES, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5300 AUSTRAL LOOP  
 APT/SUITE  
 City AUSTIN State TX Zip Code 78739-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : SA11A.763607**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. MCCRINK, EDWARD, JOHN, MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25232 PERCH DR  
 City DANA POINT State CA Zip Code 92629-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : SA11A.763326**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. MCINTOSH, VIVIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3256 SAND CREEK RD  
 City OTTAWA State KS Zip Code 66067-8491  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : SA11A.762623**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	100.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MCINTOSH, VIVIAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3256 SAND CREEK RD  
 City OTTAWA State KS Zip Code 66067-8491  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 327.00

Date of Receipt **07 / 09 / 2018**  
**Transaction ID : SA11A.762624**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. MILLER, BERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address INFO REQUESTED  
 City BLAINE State WA Zip Code 98230-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 20 / 2018**  
**Transaction ID : SA11A.762969**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. MILLER, BERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address INFO REQUESTED  
 City BLAINE State WA Zip Code 98230-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **08 / 17 / 2018**  
**Transaction ID : SA11A.762970**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MILLER, BERN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address INFO REQUESTED

City BLAINE	State WA	Zip Code 98230-
----------------	-------------	--------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2018

**Transaction ID : SA11A.763287**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

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

Mailing Address INFO REQUESTED

City BLAINE	State WA	Zip Code 98230-
----------------	-------------	--------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2018

**Transaction ID : SA11A.763479**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

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

Mailing Address INFO REQUESTED

City BLAINE	State WA	Zip Code 98230-
----------------	-------------	--------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2018

**Transaction ID : SA11A.763642**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MILLER, BERN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address INFO REQUESTED  
 City BLAINE State WA Zip Code 98230-  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 21 / 2018  
**Transaction ID : SA11A.764049**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
 CONTRIBUTION

**B. MINNIS, RANDALL, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 718 LAKEPOINT LOOP  
 City POTTSBORO State TX Zip Code 75076-4648  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTANT  
 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  
 07 / 05 / 2018  
**Transaction ID : SA11A.762557**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

**C. MINNIS, RANDALL, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 718 LAKEPOINT LOOP  
 City POTTSBORO State TX Zip Code 75076-4648  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTANT  
 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  
 08 / 05 / 2018  
**Transaction ID : SA11A.762703**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MINNIS, RANDALL, L, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 718 LAKEPOINT LOOP  
 City POTTSBORO State TX Zip Code 75076-4648  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00

Date of Receipt 09 / 05 / 2018  
**Transaction ID : SA11A.763610**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. MORRIS, TOM, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 890 MAPLEWOOD DR.  
 City RENO State NV Zip Code 89509-3670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762771**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. MORRIS, TOM, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 890 MAPLEWOOD DR.  
 City RENO State NV Zip Code 89509-3670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763065**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	150.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MORRIS, TOM, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 890 MAPLEWOOD DR.  
 City RENO State NV Zip Code 89509-3670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA11A.763770**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. MUENKS, PATRICK, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17824 MUELLER RD  
 City GLENCOE State MO Zip Code 63038-1925  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 08 / 18 / 2018  
**Transaction ID : SA11A.763147**  
 Amount of Each Receipt this Period 40.00  
 Memo Item CONTRIBUTION

**C. MUNSON, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1405 VICTORIA AVE  
 City ATWATER State CA Zip Code 95301-8435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : SA11A.762654**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	315.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MUNSON, LINDA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1405 VICTORIA AVE  
 City ATWATER State CA Zip Code 95301-8435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 28 / 2018  
**Transaction ID : SA11A.763553**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. ORLOFF, PHYLLIS, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1105  
 City CHESTER State CA Zip Code 96020-1105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : SA11A.762592**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. ORLOFF, PHYLLIS, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1105  
 City CHESTER State CA Zip Code 96020-1105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 05 / 2018  
**Transaction ID : SA11A.762736**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	300.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. ORLOFF, PHYLLIS, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1105  
 City CHESTER State CA Zip Code 96020-1105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 05 / 2018  
**Transaction ID : SA11A.763615**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. OSWALD, STEVEN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6024 BEACON SHORES ST APT 1908  
 City TAMPA State FL Zip Code 33616-1317  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LNR PROPERTY Occupation (for Individual) ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763185**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. PEOPLES, JASON, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2200 W VERNON AVE  
 City KINSTON State NC Zip Code 28504-3368  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HIGHLAND TV Occupation (for Individual) SALES  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 06 / 2018  
**Transaction ID : SA11A.763617**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. PERNICONE, MEIRA, M, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 TARAWOOD DR

City ORLANDO	State FL	Zip Code 32819-4420
-----------------	-------------	------------------------

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

Name of Employer (for Individual) USF MORSANI COLLEGE OF MEDICINE	Occupation (for Individual) SURGEON
----------------------------------------------------------------------	----------------------------------------

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
07		01		2018

**Transaction ID : SA11A.762576**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**B. PERNICONE, MEIRA, M, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 TARAWOOD DR

City ORLANDO	State FL	Zip Code 32819-4420
-----------------	-------------	------------------------

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

Name of Employer (for Individual) USF MORSANI COLLEGE OF MEDICINE	Occupation (for Individual) SURGEON
----------------------------------------------------------------------	----------------------------------------

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
08		01		2018

**Transaction ID : SA11A.762721**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. PERNICONE, MEIRA, M, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5922 TARAWOOD DR

City ORLANDO	State FL	Zip Code 32819-4420
-----------------	-------------	------------------------

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

Name of Employer (for Individual) USF MORSANI COLLEGE OF MEDICINE	Occupation (for Individual) SURGEON
----------------------------------------------------------------------	----------------------------------------

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
09		01		2018

**Transaction ID : SA11A.763490**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. PORTIER, ELAINE, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15770 SW TOWHEE LN  
 City BEAVERTON State OR Zip Code 97007-9053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **08 / 21 / 2018**  
**Transaction ID : SA11A.763986**  
 Amount of Each Receipt this Period **10.00**  
 Memo Item  
**CONTRIBUTION**

**B. POWELL, MATT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 304 S PLANT AVE  
 City TAMPA State FL Zip Code 33606-2326  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **SELF-EMPLOYED** Occupation (for Individual) **ATTORNEY**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **07 / 18 / 2018**  
**Transaction ID : SA11A.762544**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

**C. QUINN, JOHN, H, MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 10TH AVE S UNIT 213  
 City NAPLES State FL Zip Code 34102-8226  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **RETIRED** Occupation (for Individual) **RETIRED**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt **09 / 30 / 2018**  
**Transaction ID : SA11A.763820**  
 Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2010.00</b>
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. RAFFIN, ALBERT, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 451 WAVERLY RD

City PORTER	State IN	Zip Code 46304-1760
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) BUILDING CONTRACTOR
----------------------------------------------------	----------------------------------------------------

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
08		17		2018

**Transaction ID : SA11A.763232**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B. RASMUSSEN, DUANE, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 619 IOWA AVE

City PRATT	State KS	Zip Code 67124-2123
---------------	-------------	------------------------

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

Name of Employer (for Individual) UNION PACIFIC RR	Occupation (for Individual) LOCO. ENG.
-------------------------------------------------------	-------------------------------------------

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
07		10		2018

**Transaction ID : SA11A.762605**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

**C. RASMUSSEN, DUANE, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 619 IOWA AVE

City PRATT	State KS	Zip Code 67124-2123
---------------	-------------	------------------------

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

Name of Employer (for Individual) UNION PACIFIC RR	Occupation (for Individual) LOCO. ENG.
-------------------------------------------------------	-------------------------------------------

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
08		10		2018

**Transaction ID : SA11A.762849**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. RASMUSSEN, DUANE, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 619 IOWA AVE

City PRATT	State KS	Zip Code 67124-2123
---------------	-------------	------------------------

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

Name of Employer (for Individual) UNION PACIFIC RR	Occupation (for Individual) LOCO. ENG.
-------------------------------------------------------	-------------------------------------------

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
09	/	10	/	2018

**Transaction ID : SA11A.763618**

Amount of Each Receipt this Period  
25.00

Memo Item  
CONTRIBUTION

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

Mailing Address 10801 W CHARLESTON BLVD

City LAS VEGAS	State NV	Zip Code 89135-1200
-------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2018

**Transaction ID : SA11A.763322**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

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

Mailing Address 7865 KENSINGHAM CT

City ORLANDO	State FL	Zip Code 32835-6832
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE CONSULTANT
----------------------------------------------------	-------------------------------------------------------

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
08	/	17	/	2018

**Transaction ID : SA11A.763229**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. RODAS, JOAQUIN, R., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9344 OTTO ST  
 City DOWNEY State CA Zip Code 90240-3567  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : SA11A.763238**  
 Amount of Each Receipt this Period 350.00  
 Memo Item CONTRIBUTION

**B. SAENZ, JOSE, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1110 LA VISTA AVE  
 City MCALLEN State TX Zip Code 78501-4024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOSE R. RON SAENZ Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762650**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C. SAENZ, JOSE, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1110 LA VISTA AVE  
 City MCALLEN State TX Zip Code 78501-4024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOSE R. RON SAENZ Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 01 / 2018  
**Transaction ID : SA11A.762800**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	450.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SAENZ, JOSE, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1110 LA VISTA AVE  
 City MCALLEN State TX Zip Code 78501-4024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOSE R. RON SAENZ Occupation (for Individual) TRANSPORTATION  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 01 / 2018  
**Transaction ID : SA11A.763547**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. SANDERS, RICHARD, B, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25974 GOLD BEACH DR SW  
 City VASHON State WA Zip Code 98070-8526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 17 / 2018  
**Transaction ID : SA11A.763228**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. SCHELL, DOUGLAS, W, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 604 1/2 LARK DR.  
 City SHELBY State NC Zip Code 28150-4933  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762717**  
 Amount of Each Receipt this Period 20.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	320.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SCHELL, DOUGLAS, W, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 604 1/2 LARK DR.

City SHELBY	State NC	Zip Code 28150-4933
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2018

**Transaction ID : SA11A.762954**

Amount of Each Receipt this Period  
20.00

Memo Item CONTRIBUTION

**B. SCHELL, DOUGLAS, W, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 604 1/2 LARK DR.

City SHELBY	State NC	Zip Code 28150-4933
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2018

**Transaction ID : SA11A.762991**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**C. SCHELL, DOUGLAS, W, DR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 604 1/2 LARK DR.

City SHELBY	State NC	Zip Code 28150-4933
----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2018

**Transaction ID : SA11A.763753**

Amount of Each Receipt this Period  
20.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	65.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SCHERER, ALEX, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 E 87TH ST  
APT 6B

City NEW YORK State NY Zip Code 10128-1039

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

Name of Employer (for Individual) WATFORD SERVICES INC Occupation (for Individual) EXEC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762661**

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

**B. SCHERER, ALEX, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 E 87TH ST  
APT 6B

City NEW YORK State NY Zip Code 10128-1039

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

Name of Employer (for Individual) WATFORD SERVICES INC Occupation (for Individual) EXEC

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 08 / 01 / 2018  
**Transaction ID : SA11A.762812**

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

**C. SCHERER, ALEX, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 56 E 87TH ST  
APT 6B

City NEW YORK State NY Zip Code 10128-1039

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

Name of Employer (for Individual) WATFORD SERVICES INC Occupation (for Individual) EXEC

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 01 / 2018  
**Transaction ID : SA11A.763560**

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 150.00

**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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SCHUBERT, PHILLIP, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44239 W GRANITE DR  
 City MARICOPA State AZ Zip Code 85139-8869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SUBSEA ROBOTICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 06 / 2018  
**Transaction ID : SA11A.763621**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. SCHUBERT, PHILLIP, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44239 W GRANITE DR  
 City MARICOPA State AZ Zip Code 85139-8869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SUBSEA ROBOTICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 12 / 2018  
**Transaction ID : SA11A.763700**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C. SCHUBERT, PHILLIP, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44239 W GRANITE DR  
 City MARICOPA State AZ Zip Code 85139-8869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) SUBSEA ROBOTICS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 09 / 30 / 2018  
**Transaction ID : SA11A.763822**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SEIDEL, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8058 GLENDALE RD  
 City CHEVY CHASE State MD Zip Code 20815-5901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CREDIT SUISSE Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : SA11A.762834**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. SHULT, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3059 WATERBURY CT.  
 City FT MITCHELL State KY Zip Code 41017-8124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PROMACH Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : SA11A.762638**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

**C. SHULT, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3059 WATERBURY CT.  
 City FT MITCHELL State KY Zip Code 41017-8124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PROMACH Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 01 / 2018  
**Transaction ID : SA11A.762784**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SHULT, BILL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3059 WATERBURY CT.  
 City FT MITCHELL State KY Zip Code 41017-8124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PROMACH Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 01 / 2018  
**Transaction ID : SA11A.763535**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

**B. SIMMONS, GRETCHEN, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38155 SAINT MARY ST  
 City CLINTON TOWNSHIP State MI Zip Code 48036-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DMC SERVICE GROUP Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : SA11A.762597**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

**C. SIMMONS, GRETCHEN, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38155 SAINT MARY ST  
 City CLINTON TOWNSHIP State MI Zip Code 48036-4046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DMC SERVICE GROUP Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : SA11A.762845**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SIMMONS, GRETCHEN, K, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38155 SAINT MARY ST

City CLINTON TOWNSHIP	State MI	Zip Code 48036-4046
--------------------------	-------------	------------------------

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

Name of Employer (for Individual) DMC SERVICE GROUP	Occupation (for Individual) CEO
--------------------------------------------------------	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1050.00

Date of Receipt  
MM / DD / YYYY  
09 / 10 / 2018

**Transaction ID : SA11A.763623**

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B. SINGLETON, THOMAS, W., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4564 PEYTONSVILLE RD

City FRANKLIN	State TN	Zip Code 37064-7611
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 17 / 2018

**Transaction ID : SA11A.763239**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. SPILLARS, RODGER, BRANNON, DR., M.D.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3629 E 102ND ST

City TULSA	State OK	Zip Code 74137-5721
---------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) PHYSICIAN
----------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
08 / 19 / 2018

**Transaction ID : SA11A.763234**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1300.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. STROBRIDGE, JAMES, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 60 LOCK ST  
 UNIT C  
 City NASHUA State NH Zip Code 03064-2476  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PFIZER Occupation (for Individual) BIO-PHARMA MECHANIC  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 21 / 2018  
**Transaction ID : SA11A.763958**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. TAUB, H, RUSSELL, HON,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 22 OAKLAWN AVE  
 APT 310  
 City CRANSTON State RI Zip Code 02920-9310  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TAUB FEUER ASSOCIATES Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762803**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. VAN THIEL, GREGORY, J, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4771 E CRANE RD  
 City WASILLA State AK Zip Code 99654-0935  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762791**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. VAN THIEL, GREGORY, J, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4771 E CRANE RD

City WASILLA	State AK	Zip Code 99654-0935
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2018

**Transaction ID : SA11A.763090**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**B. VAN THIEL, GREGORY, J, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4771 E CRANE RD

City WASILLA	State AK	Zip Code 99654-0935
-----------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
325.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2018

**Transaction ID : SA11A.763762**

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**C. VAUTIER, CYNTHIA, LANDON, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 157TH AVE SE

City BELLEVUE	State WA	Zip Code 98008-4828
------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
279.00

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2018

**Transaction ID : SA11A.762580**

Amount of Each Receipt this Period  
31.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	81.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. VAUTIER, CYNTHIA, LANDON, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 157TH AVE SE  
 City BELLEVUE State WA Zip Code 98008-4828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 08 / 10 / 2018  
**Transaction ID : SA11A.762840**  
 Amount of Each Receipt this Period 31.00  
 Memo Item CONTRIBUTION

**B. VAUTIER, CYNTHIA, LANDON, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 516 157TH AVE SE  
 City BELLEVUE State WA Zip Code 98008-4828  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 279.00

Date of Receipt 09 / 10 / 2018  
**Transaction ID : SA11A.763625**  
 Amount of Each Receipt this Period 31.00  
 Memo Item CONTRIBUTION

**C. VILLACORTE, HAROLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4564 NEWTON ST, APT B APT B  
 City DENVER State CO Zip Code 80211-1386  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBERT HALF Occupation (for Individual) DEVELOPER - SPS TEAM  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : SA11A.762747**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	87.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. VILLACORTE, HAROLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4564 NEWTON ST, APT B  
 APT B  
 City DENVER State CO Zip Code 80211-1386  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBERT HALF Occupation (for Individual) DEVELOPER - SPS TEAM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763040**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**B. VILLACORTE, HAROLD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4564 NEWTON ST, APT B  
 APT B  
 City DENVER State CO Zip Code 80211-1386  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROBERT HALF Occupation (for Individual) DEVELOPER - SPS TEAM  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 20 / 2018  
**Transaction ID : SA11A.763763**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. WALKER, JANETA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8103 GOLDEN AVE  
 City LEMON GROVE State CA Zip Code 91945-2509  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SALK INSTITUTE Occupation (for Individual) ADMINISTRATIVE ASSISTANT III  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 24 / 2018  
**Transaction ID : SA11A.763343**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	150.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. WHITE, ROBERT, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 512 SOUTHERN HILLS CT  
 City MELBOURNE State FL Zip Code 32940-1919  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SUNRISE POOL AND SPA Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2018  
**Transaction ID : SA11A.762542**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. WILCOX, JONATHAN, J., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 121 CROYDON WAY  
 City WOODSIDE State CA Zip Code 94062-2312  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 18 / 2018  
**Transaction ID : SA11A.763734**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. WILSON, SANDRA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3215 PENROD LN  
 City GARDNERVILLE State NV Zip Code 89410-7067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INDEPENDENT CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2018  
**Transaction ID : SA11A.763235**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> 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 219
	<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. WITZKY, CHRISTOPHER, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 54 SACHEM DR  
 City GLASTONBURY State CT Zip Code 06033-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED TECHNOLOGIES CORP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 08 / 18 / 2018  
**Transaction ID : SA11A.763233**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. WITZKY, CHRISTOPHER, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 54 SACHEM DR  
 City GLASTONBURY State CT Zip Code 06033-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED TECHNOLOGIES CORP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 13 / 2018  
**Transaction ID : SA11A.763710**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. WITZKY, CHRISTOPHER, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 54 SACHEM DR  
 City GLASTONBURY State CT Zip Code 06033-2726  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) UNITED TECHNOLOGIES CORP Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2018  
**Transaction ID : SA11A.763817**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. WOOD, ROSS, LEONARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12992 TRAIL VIEW LANE

City CHINO HILLS	State CA	Zip Code 91709-1015
---------------------	-------------	------------------------

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

Name of Employer (for Individual) WEST HILLS CONSTRUCTION, INC.	Occupation (for Individual) GENERAL CONTRACTOR
--------------------------------------------------------------------	---------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
07 / 20 / 2018

**Transaction ID : SA11A.762715**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**B. WOOD, ROSS, LEONARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12992 TRAIL VIEW LANE

City CHINO HILLS	State CA	Zip Code 91709-1015
---------------------	-------------	------------------------

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

Name of Employer (for Individual) WEST HILLS CONSTRUCTION, INC.	Occupation (for Individual) GENERAL CONTRACTOR
--------------------------------------------------------------------	---------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
08 / 20 / 2018

**Transaction ID : SA11A.763202**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**C. WOOD, ROSS, LEONARD, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12992 TRAIL VIEW LANE

City CHINO HILLS	State CA	Zip Code 91709-1015
---------------------	-------------	------------------------

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

Name of Employer (for Individual) WEST HILLS CONSTRUCTION, INC.	Occupation (for Individual) GENERAL CONTRACTOR
--------------------------------------------------------------------	---------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
09 / 20 / 2018

**Transaction ID : SA11A.763771**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 219
<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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. ZUBERI, IMAAD, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10166 RUSH ST  
 City SOUTH EL MONTE State CA Zip Code 91733-3224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AVENUE VENTURES Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 20 / 2018  
**Transaction ID : SA11A.763243**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**B. LAW OFFICES OF RAY CHRISTOPHER LOPEZ PA**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 S ALBANY AVE  
 City TAMPA State FL Zip Code 33606-1710  
 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 ▼ 500.00

Date of Receipt 07 / 18 / 2018  
**Transaction ID : SA11A.762545**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION  
 SEE ATTRIBUTION BELOW

**C. LOPEZ, RAY, CHRISTOPHER, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 S ALBANY AVE  
 City TAMPA State FL Zip Code 33606-1710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 18 / 2018  
**Transaction ID : SA11A.762546**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION  
 PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	51709.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 67 OF 219
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 25 MASSACHUSETTS AVE NW

City WASHINGTON	State DC	Zip Code 20001-1430
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00413955

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

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
09		18		2018

**Transaction ID : SA11C.763732**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1445 NEW YORK AVE NW  
STE 800

City WASHINGTON	State DC	Zip Code 20005-2125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00359539

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

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
09		27		2018

**Transaction ID : SA11C.763781**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C. AT&T FEDERAL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 208 S AKARD ST  
STE 3521

City DALLAS	State TX	Zip Code 75202-4206
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2018

**Transaction ID : SA11C.763780**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> 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 219
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. COMCAST CORPORATION & NBCUNIVERSAL PAC**

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

Mailing Address 1701 JOHN F KENNEDY BLVD  
FL 49

City PHILADELPHIA	State PA	Zip Code 19103-2855
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2018

**Transaction ID : SA11C.763456**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. FMR LLC PAC - FEDERAL - FIDELITY PAC**

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

Mailing Address 200 SEAPORT BLVD

City BOSTON	State MA	Zip Code 02210-2031
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00380550

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2018

**Transaction ID : SA11C.763454**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. GENERAL MOTORS COMPANY PAC**

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

Mailing Address 25 MASSACHUSETTS AVE NW  
STE 400

City WASHINGTON	State DC	Zip Code 20001-1427
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00076810

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2018

**Transaction ID : SA11C.763783**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 219
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. MICROSOFT CORPORATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16011 NE 36TH WAY

City REDMOND	State WA	Zip Code 98052-6301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
08 / 03 / 2018

**Transaction ID : SA11C.762698**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. NATIONAL AUTOMOBILE DEALERS ASSOCIATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8400 WESTPARK DR

City TYSONS	State VA	Zip Code 22102-5116
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040998

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
07 / 18 / 2018

**Transaction ID : SA11C.762543**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3138 10TH ST N

City ARLINGTON	State VA	Zip Code 22201-2160
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040659

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

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  
08 / 30 / 2018

**Transaction ID : SA11C.763455**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	30500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 219
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. STRIPE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 2ND STREET

City SAN FRANCISCO	State CA	Zip Code 94105-3727
-----------------------	-------------	------------------------

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 ▼  
400.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : SA15.19766**

Amount of Each Receipt this Period  
82.32

Memo Item  
REFUND: CREDIT CARD MERCHANT FEE

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

Mailing Address 140 2ND STREET

City SAN FRANCISCO	State CA	Zip Code 94105-3727
-----------------------	-------------	------------------------

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 ▼  
400.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		27		2018

**Transaction ID : SA15.19767**

Amount of Each Receipt this Period  
72.80

Memo Item  
REFUND: CREDIT CARD MERCHANT FEE

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	155.12
<b>TOTAL</b> This Period (last page this line number only).....	155.12

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COPENHAVER, MARIANNE, , ,**

Mailing Address 224 F ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2018

FEC Identification Number

C

**Transaction ID : SB21B.I1980i**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. COPENHAVER, MARIANNE, , ,**

Mailing Address 224 F ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2018

FEC Identification Number

C

**Transaction ID : SB21B.I1983i**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. COPENHAVER, MARIANNE, , ,**

Mailing Address 224 F ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		04		2018

FEC Identification Number

C

**Transaction ID : SB21B.I1985**

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)..... ▶

9000.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EL-ZAATARI, IVY, , ,**

Mailing Address 224 F ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1981I**  
Amount of Each Disbursement this Period  
[ ] 2060.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. EL-ZAATARI, IVY, , ,**

Mailing Address 224 F ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1983I**  
Amount of Each Disbursement this Period  
[ ] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GOR, SERGIO, , ,**

Mailing Address 104 S COLUMBUS STREET

City  
ARLINGTON

State  
VA

Zip Code  
22204-0598

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1979I**  
Amount of Each Disbursement this Period  
[ ] 7090.67

Memo Item

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

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

1	1	1	1	1	1	1	1	1	1
1	1	1	1	1	1	1	1	1	1

1	1	1	1	1	1	1	1	1	1
1	1	1	1	1	1	1	1	1	1

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PARISH, IAN, , ,**

Mailing Address 3257 STANTON RD SE

City  
WASHINGTON

State  
DC

Zip Code  
20020

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	1	8		

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I1977**  
Amount of Each Disbursement this Period  
[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PARISH, IAN, , ,**

Mailing Address 3257 STANTON RD SE

City  
WASHINGTON

State  
DC

Zip Code  
20020

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	1			2	0	1	8		

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I1984**  
Amount of Each Disbursement this Period  
[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PAUL, KELLEY, , ,**

Mailing Address P.O. BOX 72928

City  
NEWPORT

State  
KY

Zip Code  
41072-0598

Purpose of Disbursement  
EXPENSE REIMBURSEMENT - SEE MEMOS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	1	8		

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I1977**  
Amount of Each Disbursement this Period  
[ ] 282.20

Memo Item

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

[ ] 1282.20

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PAUL, KELLEY, , ,**

Mailing Address P.O. BOX 72928

City  
NEWPORT

State  
KY

Zip Code  
41072-0598

Purpose of Disbursement  
EXPENSE REIMBURSEMENT - SEE MEMOS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1979'**  
 Amount of Each Disbursement this Period  
 [ ] 1483.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. RUSSO, ALEXANDRA, , ,**

Mailing Address 225 I STREET NE, #1014

City  
WASHINGTON

State  
DC

Zip Code  
20002-0598

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1986f**  
 Amount of Each Disbursement this Period  
 [ ] 5709.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. STAFFORD, DOUGLASS, , ,**

Mailing Address 13749 PIEDMONT VISTA DRIVE

City  
HAYMARKET

State  
VA

Zip Code  
20169-0598

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1982**  
 Amount of Each Disbursement this Period  
 [ ] 12000.00

Memo Item

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

[ ] 19192.68
--------------

**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 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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. STAFFORD, DOUGLASS, , ,</b>		Date of Disbursement MM / DD / YYYY 08 / 15 / 2018
Mailing Address 13749 PIEDMONT VISTA DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1984'</b> Amount of Each Disbursement this Period 12000.00
City HAYMARKET	State VA	Zip Code 20169-0598
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. STAFFORD, DOUGLASS, , ,</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2018
Mailing Address 13749 PIEDMONT VISTA DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1986'</b> Amount of Each Disbursement this Period 12000.00
City HAYMARKET	State VA	Zip Code 20169-0598
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2018
Mailing Address 208 S AKARD STREET		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1978</b> Amount of Each Disbursement this Period 306.95
City DALLAS	State TX	Zip Code 75202-4295
Purpose of Disbursement PHONE SERVICE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	24306.95
<b>TOTAL</b> 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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Mailing Address 208 S AKARD STREET

City DALLAS

State TX

Zip Code 75202-4295

Purpose of Disbursement PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 23 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1979  
Amount of Each Disbursement this Period  
270.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T**

Mailing Address 208 S AKARD STREET

City DALLAS

State TX

Zip Code 75202-4295

Purpose of Disbursement PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 24 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1980  
Amount of Each Disbursement this Period  
267.81

Memo Item

Full Name (Last, First, Middle Initial)

**C. BROGHAMER CONSULTING LLC**

Mailing Address 411 WALNUT STREET PMB 300

City GREEN COVE SPRINGS

State FL

Zip Code 32043-2006

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1980  
Amount of Each Disbursement this Period  
2618.35

Memo Item

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

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

3156.17

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2018
Mailing Address 411 WALNUT STREET PMB 300		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1986i</b> Amount of Each Disbursement this Period 5068.12
City GREEN COVE SPRINGS	State FL	Zip Code 32043-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CANDO POLITICS</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2018
Mailing Address 20 W 11TH ST STE 200		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1979i</b> Amount of Each Disbursement this Period 1713.38
City COVINGTON	State KY	Zip Code 41011-4112
Purpose of Disbursement WEBSITE DEVELOPMENT/CONSULTING		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHASE BANK</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 924 BROADWAY AVE., #KY3-1000		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1977</b> Amount of Each Disbursement this Period 50.00
City BOWLING GREEN	State KY	Zip Code 42101-2566
Purpose of Disbursement BANK FEE		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6831.50
<b>TOTAL</b> 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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN State KY Zip Code 42101-2566

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 01 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978  
Amount of Each Disbursement this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN State KY Zip Code 42101-2566

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 10 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978  
Amount of Each Disbursement this Period  
4.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN State KY Zip Code 42101-2566

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1979  
Amount of Each Disbursement this Period  
50.00

Memo Item

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

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

104.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN

State KY

Zip Code 42101-2566

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1980I

Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN

State KY

Zip Code 42101-2566

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1980I

Amount of Each Disbursement this Period

4.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE BANK**

Mailing Address 924 BROADWAY AVE., #KY3-1000

City BOWLING GREEN

State KY

Zip Code 42101-2566

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 20 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1980I

Amount of Each Disbursement this Period

4.00

Memo Item

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

33.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CHASE PAYMENTECH**

Mailing Address P.O. BOX 809001

City  
DALLAS

State  
TX

Zip Code  
75380-9001

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1981**  
 Amount of Each Disbursement this Period  
 [ ] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CHASE PAYMENTECH**

Mailing Address P.O. BOX 809001

City  
DALLAS

State  
TX

Zip Code  
75380-9001

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	3			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I19834**  
 Amount of Each Disbursement this Period  
 [ ] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHASE PAYMENTECH**

Mailing Address P.O. BOX 809001

City  
DALLAS

State  
TX

Zip Code  
75380-9001

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	4			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1985**  
 Amount of Each Disbursement this Period  
 [ ] 25.00

Memo Item

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

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

7	5	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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1977!  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 SPRING HILL RD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978!  
Amount of Each Disbursement this Period  
250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 SPRING HILL RD, STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement COMPLIANCE SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1979  
Amount of Each Disbursement this Period  
250.00

Memo Item

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

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

750.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EUSOCIAL LLC**

Mailing Address 5220 NEW HAVEN AVENUE

City  
FORT WAYNE

State  
IN

Zip Code  
46803

Purpose of Disbursement  
DIGITAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	3			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1977f

Amount of Each Disbursement this Period

[REDACTED] 225.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1977f

Amount of Each Disbursement this Period

[REDACTED] 16030.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADOBE**

Mailing Address 345 PARK AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1989

Amount of Each Disbursement this Period

[REDACTED] 26.49

Memo Item

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

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

[REDACTED] 16255.90

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AEROFLOT**

Mailing Address 10 ARBAT ST.

City  
MOSCOW

State  
0

Zip Code  
99999

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1990I**  
Amount of Each Disbursement this Period  
[ ] 3261.30 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. AIRBNB**

Mailing Address 888 BRANNAN STREET 4TH FLOOR

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1990I**  
Amount of Each Disbursement this Period  
[ ] 1912.72 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. AIRBNB**

Mailing Address 888 BRANNAN STREET 4TH FLOOR

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
REFUND: TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1990I**  
Amount of Each Disbursement this Period  
[ ] - 1912.72 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									0.00

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address 410 TERRY AVENUE N

City  
SEATTLE

State  
WA

Zip Code  
98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.I1990:**  
Amount of Each Disbursement this Period  
[REDACTED] 23.94

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address 410 TERRY AVENUE N

City  
SEATTLE

State  
WA

Zip Code  
98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.I19904**  
Amount of Each Disbursement this Period  
[REDACTED] 7.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]  
**Transaction ID : SB21B.I1990**  
Amount of Each Disbursement this Period  
[REDACTED] 147.20

Memo Item

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

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

[REDACTED]	0.00
------------	------

[REDACTED]	
------------	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I1990I

Amount of Each Disbursement this Period

531.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I1990I

Amount of Each Disbursement this Period

531.40

Memo Item

Full Name (Last, First, Middle Initial)

**C. ANIMOTO INC.**

Mailing Address 440 LAFAYETTE STREET FLOOR 2

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I1990I

Amount of Each Disbursement this Period

42.00

Memo Item

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

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

0.00

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 208 S AKARD STREET		FEC Identification Number C <b>Transaction ID : SB21B.I19911</b> Amount of Each Disbursement this Period 374.99
City DALLAS	State TX	
Zip Code 75202-4295	Purpose of Disbursement PHONE SERVICE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 208 S AKARD STREET		FEC Identification Number C <b>Transaction ID : SB21B.I19911</b> Amount of Each Disbursement this Period 172.51
City DALLAS	State TX	
Zip Code 75202-4295	Purpose of Disbursement PHONE SERVICE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. BUFFER, INC</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 44 TEHAMA STREET		FEC Identification Number C <b>Transaction ID : SB21B.I19911</b> Amount of Each Disbursement this Period 99.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement SOFTWARE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CLICKMETER**

Mailing Address 1355 MARKET ST,

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1991!**  
Amount of Each Disbursement this Period  
[ ] 49.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City  
WASHINGTON

State  
DC

Zip Code  
20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1992!**  
Amount of Each Disbursement this Period  
[ ] 4.40 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City  
WASHINGTON

State  
DC

Zip Code  
20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1992!**  
Amount of Each Disbursement this Period  
[ ] 34.25 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DUBLINER RESTAURANT**

Mailing Address 4 F ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1996!

Amount of Each Disbursement this Period

[REDACTED] 108.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. DUBLINER RESTAURANT**

Mailing Address 4 F ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1996!

Amount of Each Disbursement this Period

[REDACTED] 122.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. ENTERPRISE**

Mailing Address 600 CORPORATE PARK DRIVE

City  
SAINT LOUIS

State  
MO

Zip Code  
63105-4204

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1993

Amount of Each Disbursement this Period

[REDACTED] 467.72

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. EXPEDIA, INC.**

Mailing Address 333 108TH AVENUE NE

City  
BELLEVUE

State  
WA

Zip Code  
98004-5703

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1993**  
Amount of Each Disbursement this Period  
[ ] 552.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City  
MENLO PARK

State  
CA

Zip Code  
94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1993**  
Amount of Each Disbursement this Period  
[ ] 200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
REFUND: BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1993**  
Amount of Each Disbursement this Period  
[ ] - 39.00

Memo Item

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

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

[ ]	0.00
[ ]	

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement REFUND: BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1993f

Amount of Each Disbursement this Period: - 39.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement REFUND: BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1993f

Amount of Each Disbursement this Period: - 39.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. HISSHO SUSHI**

Mailing Address ONE TERMINAL DRIVE SUITE 501

City NASHVILLE State TN Zip Code 37214

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1993

Amount of Each Disbursement this Period: 9.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOOTSUITE**

Mailing Address 12 E 49TH ST

City  
NEW YORK

State  
NY

Zip Code  
10017

Purpose of Disbursement  
SOFTWARE

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
0	7		0	2		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1994I**

Amount of Each Disbursement this Period

149.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTUIT**

Mailing Address 2632 MARINE WAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1126

Purpose of Disbursement  
SOFTWARE

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
0	7		0	2		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1994I**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KLAVIYO**

Mailing Address 225 FRANKLIN ST,

City  
BOSTON

State  
MA

Zip Code  
02110

Purpose of Disbursement  
SOFTWARE

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
0	7		0	2		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1994I**

Amount of Each Disbursement this Period

3800.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAGGIANOS**

Mailing Address 6820 LBJ FREEWAY

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1994

Amount of Each Disbursement this Period

[REDACTED] 750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. NATIONALS PARK**

Mailing Address 1500 SOUTH CAPITOL STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
EVENT TICKETS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1994

Amount of Each Disbursement this Period

[REDACTED] 179.50

Memo Item

Full Name (Last, First, Middle Initial)

**C. NATIONALS PARK**

Mailing Address 1500 SOUTH CAPITOL STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
EVENT TICKETS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1994

Amount of Each Disbursement this Period

[REDACTED] 144.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SENATE DINING**

Mailing Address DIRKSEN SENATE OFFICE BUILDING

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1995!  
Amount of Each Disbursement this Period  
69.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SHOPIFY**

Mailing Address 33 NEW MONTGOMERY ST. STE 750

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1996C  
Amount of Each Disbursement this Period  
79.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City DALLAS State TX Zip Code 75235-1647

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1996  
Amount of Each Disbursement this Period  
193.98

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City  
DALLAS

State  
TX

Zip Code  
75235-1647

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1996**  
Amount of Each Disbursement this Period  
[ ] 486.99

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRUMP NATIONAL**

Mailing Address 20391 LOWES ISLAND BLVD

City  
POTOMAC FALLS

State  
VA

Zip Code  
20165

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1996**  
Amount of Each Disbursement this Period  
[ ] 212.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. TYPEFORM**

Mailing Address CARRER BAC DE RODA, 163

City  
BARCELONA

State  
XX

Zip Code  
08018

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1996**  
Amount of Each Disbursement this Period  
[ ] 70.00

Memo Item

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

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

[ ]	0.00
[ ]	

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1996!</b> Amount of Each Disbursement this Period [ ] 7.92
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL	Category/Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1997!</b> Amount of Each Disbursement this Period [ ] 25.89
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL	Category/Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1997</b> Amount of Each Disbursement this Period [ ] 12.63
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL	Category/Type [ ]	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	[ ] 0.00
<b>TOTAL</b> 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)

21b     22     23     26     27  
 28a     28b     28c     29     30b

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO    State CA    Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1997

Amount of Each Disbursement this Period: 4.00

Memo Item

**B. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO    State CA    Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1997

Amount of Each Disbursement this Period: 16.65

Memo Item

**C. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO    State CA    Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President  
 Disbursement For:  Primary     General     Other (specify) ▼

State:    District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1997

Amount of Each Disbursement this Period: 9.14

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C

**Transaction ID : SB21B.I1997!**

Amount of Each Disbursement this Period

10.63

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C

**Transaction ID : SB21B.I1997!**

Amount of Each Disbursement this Period

7.63

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C

**Transaction ID : SB21B.I1997**

Amount of Each Disbursement this Period

9.63

Memo Item

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

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

0.00

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1997f

Amount of Each Disbursement this Period: 34.18

Memo Item

**B. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1997f

Amount of Each Disbursement this Period: 10.85

Memo Item

**C. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1998

Amount of Each Disbursement this Period: 11.78

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1998'**

Amount of Each Disbursement this Period

[ ] 5.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I19982**

Amount of Each Disbursement this Period

[ ] 5.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1998**

Amount of Each Disbursement this Period

[ ] 8.06

Memo Item

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

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

[ ] 0.00

[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 13.18

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 5.11

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 21.43

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

# 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 7.33

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 14.73

Memo Item

Full Name (Last, First, Middle Initial)

### C. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1998  
Amount of Each Disbursement this Period

[REDACTED] 16.27

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1999:**  
 Amount of Each Disbursement this Period  
 [ ] 7.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I19994**  
 Amount of Each Disbursement this Period  
 [ ] 176.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I1999**  
 Amount of Each Disbursement this Period  
 [ ] 10.87

Memo Item

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

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

[ ]	0.00
-----	------

[ ]	
-----	--

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1999</b> Amount of Each Disbursement this Period [ ] 31.39
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1999</b> Amount of Each Disbursement this Period [ ] 24.01
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. UBER TECHNOLOGIES</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2018
Mailing Address 182 HOWARD STREET, SUITE 8		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I1999</b> Amount of Each Disbursement this Period [ ] 53.03
City SAN FRANCISCO	State CA	Zip Code 94105-1611
Purpose of Disbursement TRAVEL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 0.00
<b>TOTAL</b> 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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

FEC Identification Number

C

**Transaction ID : SB21B.I1999!**  
Amount of Each Disbursement this Period

6.99

Purpose of Disbursement  
TRAVEL

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

FEC Identification Number

C

**Transaction ID : SB21B.I2000**  
Amount of Each Disbursement this Period

45.99

Purpose of Disbursement  
TRAVEL

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

FEC Identification Number

C

**Transaction ID : SB21B.I2000**  
Amount of Each Disbursement this Period

12.52

Purpose of Disbursement  
TRAVEL

Category/Type

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2000**  
Amount of Each Disbursement this Period

[REDACTED] 54.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2000**  
Amount of Each Disbursement this Period

[REDACTED] 19.28

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2000**  
Amount of Each Disbursement this Period

[REDACTED] 16.56

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2000!

Amount of Each Disbursement this Period: 46.49

Memo Item

**B. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2000!

Amount of Each Disbursement this Period: 17.26

Memo Item

**C. UBER TECHNOLOGIES**

Full Name (Last, First, Middle Initial)

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2000!

Amount of Each Disbursement this Period: 6.99

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2000f

Amount of Each Disbursement this Period

[REDACTED] 10.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2000f

Amount of Each Disbursement this Period

[REDACTED] 46.49

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2001

Amount of Each Disbursement this Period

[REDACTED] 8.02

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2001'  
Amount of Each Disbursement this Period

[REDACTED] 15.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I20012  
Amount of Each Disbursement this Period

[REDACTED] 10.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2001  
Amount of Each Disbursement this Period

[REDACTED] 7.63

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I20014**  
Amount of Each Disbursement this Period

[REDACTED] 60.47

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I20015**  
Amount of Each Disbursement this Period

[REDACTED] 6.99

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2001**  
Amount of Each Disbursement this Period

[REDACTED] 55.11

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2001**  
Amount of Each Disbursement this Period  
[ ] 47.44

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2001**  
Amount of Each Disbursement this Period  
[ ] 41.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2001**  
Amount of Each Disbursement this Period  
[ ] 11.11

Memo Item

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

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

[ ]	0.00
-----	------

[ ]	
-----	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2002I

Amount of Each Disbursement this Period

[REDACTED] 77.59

Memo Item

Full Name (Last, First, Middle Initial)

**B. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2002I

Amount of Each Disbursement this Period

[REDACTED] 8.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2002I

Amount of Each Disbursement this Period

[REDACTED] 7.45

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VENNGAGE**

Mailing Address 1406-2 CARLTON STREET  
TORONTO, ONTARIO

City M5B1J5, CANADA State FF Zip Code 99999

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2002!**  
Amount of Each Disbursement this Period  
49.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2003!**  
Amount of Each Disbursement this Period  
193.48

Memo Item

Full Name (Last, First, Middle Initial)

**C. WAL-MART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716-6209

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2003**  
Amount of Each Disbursement this Period  
7.85

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ZAGG PHONE REPAIR**

Mailing Address 1204 G ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
OFFICE EQUIPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2003:**  
Amount of Each Disbursement this Period

[REDACTED] 310.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1978:**  
Amount of Each Disbursement this Period

[REDACTED] 18965.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADOBE**

Mailing Address 345 PARK AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2008**  
Amount of Each Disbursement this Period

[REDACTED] 26.49

Memo Item

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

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

[REDACTED] 18965.30

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMAZON.COM**

Mailing Address 410 TERRY AVENUE N

City  
SEATTLE

State  
WA

Zip Code  
98109

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2006!**

Amount of Each Disbursement this Period

[Redacted] 23.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2014f**

Amount of Each Disbursement this Period

[Redacted] 281.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2016**

Amount of Each Disbursement this Period

[Redacted] 271.20

Memo Item

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

[Redacted] 0.00

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

[Redacted]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
REFUND: TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2007f**

Amount of Each Disbursement this Period

[ ] - 59.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2012f**

Amount of Each Disbursement this Period

[ ] 359.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2014**

Amount of Each Disbursement this Period

[ ] 359.00

Memo Item

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

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

[ ] 0.00

[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANIMOTO INC.**

Mailing Address 440 LAFAYETTE STREET FLOOR 2

City NEW YORK State NY Zip Code 10003

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2008i

Amount of Each Disbursement this Period

[REDACTED] 42.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. BISTRO CACAO**

Mailing Address 320 MASSACHUSETTS AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2005c

Amount of Each Disbursement this Period

[REDACTED] 291.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. BUFFER, INC**

Mailing Address 44 TEHAMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2009

Amount of Each Disbursement this Period

[REDACTED] 99.00

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVENUE NW

City  
WASHINGTON

State  
DC

Zip Code  
20004-2601

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2006'

Amount of Each Disbursement this Period

[REDACTED] 544.16

Memo Item

Full Name (Last, First, Middle Initial)

**B. CG GOLD PIPERS BAR AND GRILL**

Mailing Address 4544 CURRY FORD RD.

City  
ORLANDO

State  
FL

Zip Code  
32812

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I20057

Amount of Each Disbursement this Period

[REDACTED] 384.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. CLICKMETER**

Mailing Address 1355 MARKET ST,

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2009

Amount of Each Disbursement this Period

[REDACTED] 49.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COURTYARD MARRIOTT**

Mailing Address 10400 FERNWOOD ROAD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement  
TRAVEL

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
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2017!**

Amount of Each Disbursement this Period

[REDACTED] 9.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. COURTYARD MARRIOTT**

Mailing Address 10400 FERNWOOD ROAD

City  
BETHESDA

State  
MD

Zip Code  
20817

Purpose of Disbursement  
TRAVEL

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
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2018C**

Amount of Each Disbursement this Period

[REDACTED] 260.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City  
WASHINGTON

State  
DC

Zip Code  
20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

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
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2004**

Amount of Each Disbursement this Period

[REDACTED] 5.50

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City WASHINGTON

State DC

Zip Code 20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2005'

Amount of Each Disbursement this Period

[ ] 12.70 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City WASHINGTON

State DC

Zip Code 20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I20055

Amount of Each Disbursement this Period

[ ] 4.40 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. DUBLINER RESTAURANT**

Mailing Address 4 F ST NW

City WASHINGTON

State DC

Zip Code 20001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2005

Amount of Each Disbursement this Period

[ ] 181.48 [ ]

Memo Item

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

[ ] 0.00 [ ]

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2003**  
 Amount of Each Disbursement this Period  
 584.56

Memo Item

Full Name (Last, First, Middle Initial)

**B. FEDEX**

Mailing Address 13155 NOEL ROAD, SUITE 1600

City DALLAS State TX Zip Code 75240-5032

Purpose of Disbursement SHIPPING/DELIVERY

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2007**  
 Amount of Each Disbursement this Period  
 109.01

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City OMAHA State NE Zip Code 68103-2818

Purpose of Disbursement BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2003**  
 Amount of Each Disbursement this Period  
 7.76

Memo Item

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2003I

Amount of Each Disbursement this Period

[REDACTED] 0.19

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2003I

Amount of Each Disbursement this Period

[REDACTED] 0.36

Memo Item

Full Name (Last, First, Middle Initial)

**C. HISSHO SUSHI**

Mailing Address ONE TERMINAL DRIVE SUITE 501

City  
NASHVILLE

State  
TN

Zip Code  
37214

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2003I

Amount of Each Disbursement this Period

[REDACTED] 9.74

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HISSHO SUSHI**

Mailing Address ONE TERMINAL DRIVE SUITE 501

City  
NASHVILLE

State  
TN

Zip Code  
37214

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2004

Amount of Each Disbursement this Period

[REDACTED] 9.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOOTSUITE**

Mailing Address 12 E 49TH ST

City  
NEW YORK

State  
NY

Zip Code  
10017

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2007

Amount of Each Disbursement this Period

[REDACTED] 149.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2011

Amount of Each Disbursement this Period

[REDACTED] 397.10

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)  
**A. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City DALLAS State TX Zip Code 75240

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I20113  
Amount of Each Disbursement this Period: 355.83

Memo Item

Full Name (Last, First, Middle Initial)  
**B. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City DALLAS State TX Zip Code 75240

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I20113  
Amount of Each Disbursement this Period: 3052.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. INTUIT**

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043-1126

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I2008  
Amount of Each Disbursement this Period: 50.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JETBLUE**

Mailing Address 11829 QUEENS BOULEVARD

City  
FOREST HILLS

State  
NY

Zip Code  
11375-7212

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2015!**  
Amount of Each Disbursement this Period  
[ ] 776.20 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. KLAVIYO**

Mailing Address 225 FRANKLIN ST,

City  
BOSTON

State  
MA

Zip Code  
02110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2009!**  
Amount of Each Disbursement this Period  
[ ] 3800.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. MAGGIANOS**

Mailing Address 6820 LBJ FREEWAY

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2006**  
Amount of Each Disbursement this Period  
[ ] 1343.58 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						0	.	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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. PAPERFORM**

Mailing Address 64 TABRETT ST, BANKSIA

City NSW 2216 AUSTRALIA

State FF

Zip Code 99999

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I20097  
Amount of Each Disbursement this Period

39.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. REBRANDLY**

Mailing Address 1355 MARKET STREET

City SAN FRANCISCO

State CA

Zip Code 94103

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I20094  
Amount of Each Disbursement this Period

19.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SENATE DINING**

Mailing Address DIRKSEN SENATE OFFICE BUILDING

City WASHINGTON

State DC

Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2005  
Amount of Each Disbursement this Period

79.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SHOPIFY**

Mailing Address 33 NEW MONTGOMERY ST. STE 750

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2009I

Amount of Each Disbursement this Period

79.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City DALLAS State TX Zip Code 75235-1647

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2010I

Amount of Each Disbursement this Period

7.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647

City DALLAS State TX Zip Code 75235-1647

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2017

Amount of Each Disbursement this Period

8.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SPIRIT AIRLINES**

Mailing Address 2800 EXECUTIVE WAY

City  
MIRAMAR

State  
FL

Zip Code  
33025

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2016I

Amount of Each Disbursement this Period

[ ] 3.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. SPIRIT AIRLINES**

Mailing Address 2800 EXECUTIVE WAY

City  
MIRAMAR

State  
FL

Zip Code  
33025

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2017I

Amount of Each Disbursement this Period

[ ] 74.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. SPIRIT AIRLINES**

Mailing Address 2800 EXECUTIVE WAY

City  
MIRAMAR

State  
FL

Zip Code  
33025

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2017I

Amount of Each Disbursement this Period

[ ] 235.19 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SWISS INTERNATIONAL AIRLINES**

Mailing Address P.O. BOX 8058 ZURICH AIRPORT

City  
ZURICH

State  
XX

Zip Code  
99999

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2016:**  
Amount of Each Disbursement this Period  
[ ] 258.87

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE FOLIO SOCIETY LTD**

Mailing Address CLOVE BUILDING, 4 MAGUIRE ST

City  
LONDON

State  
SE

Zip Code  
002NQ

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2018:**  
Amount of Each Disbursement this Period  
[ ] 98.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE FOLIO SOCIETY LTD**

Mailing Address CLOVE BUILDING, 4 MAGUIRE ST

City  
LONDON

State  
SE

Zip Code  
002NQ

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2019**  
Amount of Each Disbursement this Period  
[ ] 98.90

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE FOLIO SOCIETY LTD**

Mailing Address CLOVE BUILDING, 4 MAGUIRE ST

City LONDON

State SE

Zip Code 002NQ

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2019'

Amount of Each Disbursement this Period

98.90

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRUMP NATIONAL**

Mailing Address 20391 LOWES ISLAND BLVD

City POTOMAC FALLS

State VA

Zip Code 20165

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2015'

Amount of Each Disbursement this Period

60.60

Memo Item

Full Name (Last, First, Middle Initial)

**C. TYPEFORM**

Mailing Address CARRER BAC DE RODA, 163

City BARCELONA

State XX

Zip Code 08018

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2008'

Amount of Each Disbursement this Period

70.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
REFUND: TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2007  
Amount of Each Disbursement this Period

[REDACTED] - 30.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2010  
Amount of Each Disbursement this Period

[REDACTED] 56.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2010  
Amount of Each Disbursement this Period

[REDACTED] 9.51

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2011i**  
Amount of Each Disbursement this Period  
[ ] 63.57 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2011i**  
Amount of Each Disbursement this Period  
[ ] 11.57 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2011i**  
Amount of Each Disbursement this Period  
[ ] 41.14 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2012I**

Amount of Each Disbursement this Period

45.25

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2012I**

Amount of Each Disbursement this Period

9.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2012I**

Amount of Each Disbursement this Period

25.53

Memo Item

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2012:  
Amount of Each Disbursement this Period

25.53

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2012:  
Amount of Each Disbursement this Period

11.54

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2012:  
Amount of Each Disbursement this Period

16.62

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2012**  
Amount of Each Disbursement this Period  
[ ] 15.01 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2012**  
Amount of Each Disbursement this Period  
[ ] 67.52 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2012**  
Amount of Each Disbursement this Period  
[ ] 14.42 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

10.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

13.58

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

8.77

Memo Item

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

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

0.00

# 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

**Transaction ID : SB21B.I2013:**  
Amount of Each Disbursement this Period

12.14

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

**Transaction ID : SB21B.I2013**  
Amount of Each Disbursement this Period

14.34

Memo Item

Full Name (Last, First, Middle Initial)

### C. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2018

FEC Identification Number

C

**Transaction ID : SB21B.I2013**  
Amount of Each Disbursement this Period

18.82

Memo Item

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

0.00
------

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

6.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

7.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2013I**

Amount of Each Disbursement this Period

10.68

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2013!**

Amount of Each Disbursement this Period

[ ] 159.34 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2014C**

Amount of Each Disbursement this Period

[ ] 24.19 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2014**

Amount of Each Disbursement this Period

[ ] 8.09 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2014:**  
Amount of Each Disbursement this Period  
[ ] 19.86 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2014:**  
Amount of Each Disbursement this Period  
[ ] 52.54 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2014:**  
Amount of Each Disbursement this Period  
[ ] 11.17 [ ]

Memo Item

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

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

[ ]	0.00	[ ]
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[ ]	[ ]	[ ]
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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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2014i**

Amount of Each Disbursement this Period

[Redacted] 11.03

Memo Item

Full Name (Last, First, Middle Initial)

### B. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2014i**

Amount of Each Disbursement this Period

[Redacted] 31.39

Memo Item

Full Name (Last, First, Middle Initial)

### C. UBER TECHNOLOGIES

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2014i**

Amount of Each Disbursement this Period

[Redacted] 9.85

Memo Item

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

[Redacted]	0.00
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**TOTAL** This Period (last page this line number only)..... ▶

[Redacted]	
------------	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2015I**

Amount of Each Disbursement this Period

[ ] 18.86 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2015I**

Amount of Each Disbursement this Period

[ ] 16.56 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	5

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2015I**

Amount of Each Disbursement this Period

[ ] 74.86 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2017

Amount of Each Disbursement this Period

[ ] 7.19 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2017

Amount of Each Disbursement this Period

[ ] 30.61 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2018

Amount of Each Disbursement this Period

[ ] 30.04 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2018**  
Amount of Each Disbursement this Period

[REDACTED] 30.04

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2018**  
Amount of Each Disbursement this Period

[REDACTED] 16.64

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2018**  
Amount of Each Disbursement this Period

[REDACTED] 10.53

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I2018i**  
Amount of Each Disbursement this Period  
[ ] 9.39

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I2018i**  
Amount of Each Disbursement this Period  
[ ] 7.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address P.O. BOX 66282

City  
CHICAGO

State  
IL

Zip Code  
60666-0282

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3					2018

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I2011**  
Amount of Each Disbursement this Period  
[ ] 43.00

Memo Item

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

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

[ ] 0.00
----------

[ ]
-----

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address P.O. BOX 66282

City  
CHICAGO

State  
IL

Zip Code  
60666-0282

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2011!**

Amount of Each Disbursement this Period

[REDACTED] 43.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I20073**

Amount of Each Disbursement this Period

[REDACTED] 24.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2007**

Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US SENATE GIFT SHOP**

Mailing Address DIRKSEN SENATE OFFICE BUILDING

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I2006I

Amount of Each Disbursement this Period

5	5	5	5	5	5	5	5	5	5
0	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**B. US SENATE GIFT SHOP**

Mailing Address DIRKSEN SENATE OFFICE BUILDING

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I2006I

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

Memo Item

Full Name (Last, First, Middle Initial)

**C. VENNGAGE**

Mailing Address 1406-2 CARLTON STREET  
TORONTO, ONTARIO

City  
M5B1J5, CANADA

State  
FF

Zip Code  
99999

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21B.I2008I

Amount of Each Disbursement this Period

4	9	0	0	0	0	0	0	0	0
0	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)..... ▶

0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

0	0	0	0	0	0	0	0	0	0
0	0	0	0	0	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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City  
LEHIGH VALLEY

State  
PA

Zip Code  
18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2007**

Amount of Each Disbursement this Period

[REDACTED] 193.35

Memo Item

Full Name (Last, First, Middle Initial)

**B. VIRGIN AMERICA**

Mailing Address 555 AIRPORT BLVD, STE. 200

City  
BURLINGAME

State  
CA

Zip Code  
94010-2054

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I20157**

Amount of Each Disbursement this Period

[REDACTED] 69.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. WAL-MART**

Mailing Address 702 SW 8TH STREET

City  
BENTONVILLE

State  
AR

Zip Code  
72716-6209

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2007**

Amount of Each Disbursement this Period

[REDACTED] 22.54

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1979!**

Amount of Each Disbursement this Period

[REDACTED] 16052.44

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADDISON LEE**

Mailing Address 35-37 WILLIAM RD.

City  
LONDON

State  
NW

Zip Code  
003ER

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2029C**

Amount of Each Disbursement this Period

[REDACTED] 1976.21

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADDISON LEE**

Mailing Address 35-37 WILLIAM RD.

City  
LONDON

State  
NW

Zip Code  
003ER

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2032**

Amount of Each Disbursement this Period

[REDACTED] 113.00

Memo Item

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

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

[REDACTED] 16052.44

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ADOBE**

Mailing Address 345 PARK AVENUE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2025

Amount of Each Disbursement this Period

26.49

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADOBE**

Mailing Address 345 PARK AVENUE

City SAN JOSE State CA Zip Code 95110

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2026

Amount of Each Disbursement this Period

84.78

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City FORT WORTH State TX Zip Code 76155-2605

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2028

Amount of Each Disbursement this Period

25.00

Memo Item

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C

**Transaction ID : SB21B.I2028!**

Amount of Each Disbursement this Period

35.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C

**Transaction ID : SB21B.I20314**

Amount of Each Disbursement this Period

384.30

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
REFUND: TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C

**Transaction ID : SB21B.I2025**

Amount of Each Disbursement this Period

- 300.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2032I**

Amount of Each Disbursement this Period

309.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2032I**

Amount of Each Disbursement this Period

257.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMTRAK**

Mailing Address 60 MASSACHUSETTS AVENUE NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-4285

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2033**

Amount of Each Disbursement this Period

122.00

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ANIMOTO INC.**

Mailing Address 440 LAFAYETTE STREET FLOOR 2

City  
NEW YORK

State  
NY

Zip Code  
10003

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2026!**

Amount of Each Disbursement this Period

[REDACTED] 42.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. ARCH ROAMRIGHT**

Mailing Address 11350 MCCORMICK RD STE.102

City  
HUNT VALLEY

State  
MD

Zip Code  
21031

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2033!**

Amount of Each Disbursement this Period

[REDACTED] 232.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. BLT PRIME**

Mailing Address 1100 PENNSYLVANIA AVE NW

City  
WASHINGTON

State  
DC

Zip Code  
20004

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2024**

Amount of Each Disbursement this Period

[REDACTED] 42.30

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. BUFFER, INC**

Mailing Address 44 TEHAMA STREET

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I2027  
Amount of Each Disbursement this Period  
99.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 1ST ST. SE

City WASHINGTON State DC Zip Code 20003-1801

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I2023f  
Amount of Each Disbursement this Period  
450.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. CHICK-FIL-A**

Mailing Address 5200 BUFFINGTON ROAD

City ATLANTA State GA Zip Code 30349-2945

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I2024  
Amount of Each Disbursement this Period  
93.36

Memo Item

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

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

0.00



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CUPS & COMPANY**

Mailing Address RUSSELL SENATE OFFICE BLDG, BLDG.  
SRB65

City WASHINGTON

State DC

Zip Code 20510-0001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2024**  
Amount of Each Disbursement this Period  
[ ] 7.16

Memo Item

Full Name (Last, First, Middle Initial)

**B. DELTA AIRLINES**

Mailing Address P.O. BOX 20980

City ATLANTA

State GA

Zip Code 30320-0980

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I20291**  
Amount of Each Disbursement this Period  
[ ] 20.43

Memo Item

Full Name (Last, First, Middle Initial)

**C. DUBLINER RESTAURANT**

Mailing Address 4 F ST NW

City WASHINGTON

State DC

Zip Code 20001

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2023**  
Amount of Each Disbursement this Period  
[ ] 172.53

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2019!**

Amount of Each Disbursement this Period

[ ] 2.86 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2019!**

Amount of Each Disbursement this Period

[ ] 12.30 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2019!**

Amount of Each Disbursement this Period

[ ] 59.28 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2019**

Amount of Each Disbursement this Period

[ ] 0.23 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2019**

Amount of Each Disbursement this Period

[ ] 0.14 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2020**

Amount of Each Disbursement this Period

[ ] 0.31 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

0.58

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

0.23

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

1.11

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

[ ] 0.93

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

[ ] 2.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I2020

Amount of Each Disbursement this Period

[ ] 3.99

Memo Item

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

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

[ ] 0.00

[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

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
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2020**  
Amount of Each Disbursement this Period  
[ ] 0.26

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

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
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2020**  
Amount of Each Disbursement this Period  
[ ] 10.58

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

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
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2020**  
Amount of Each Disbursement this Period  
[ ] 3.39

Memo Item

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

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

[ ]	0.00
-----	------

[ ]	
-----	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021I**

Amount of Each Disbursement this Period

[ ] 0.44 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021I**

Amount of Each Disbursement this Period

[ ] 4.47 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021I**

Amount of Each Disbursement this Period

[ ] 4.61 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I2021**  
Amount of Each Disbursement this Period  
[ ] 0.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I2021**  
Amount of Each Disbursement this Period  
[ ] 2.70

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

**C** [ ]  
Transaction ID : **SB21B.I2021**  
Amount of Each Disbursement this Period  
[ ] 2.26

Memo Item

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

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

[ ]	0.00
-----	------

[ ]	
-----	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021**

Amount of Each Disbursement this Period

[ ] 0.28 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021**

Amount of Each Disbursement this Period

[ ] 4.11 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2021**

Amount of Each Disbursement this Period

[ ] 0.33 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2021!**

Amount of Each Disbursement this Period

[REDACTED] 26.67

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2022c**

Amount of Each Disbursement this Period

[REDACTED] 1.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2022**

Amount of Each Disbursement this Period

[REDACTED] 8.89

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2022**  
Amount of Each Disbursement this Period  
[ ] 0.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2022**  
Amount of Each Disbursement this Period  
[ ] 0.16

Memo Item

Full Name (Last, First, Middle Initial)

**C. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2022**  
Amount of Each Disbursement this Period  
[ ] 0.59

Memo Item

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

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

[ ] 0.00
----------

[ ]
-----

# 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)

## REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

### A. FIRST BANKCARD

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2022!

Amount of Each Disbursement this Period

[REDACTED] 0.86

Memo Item

Full Name (Last, First, Middle Initial)

### B. HILTON HOTELS

Mailing Address 7930 JONES BRANCH DRIVE

City  
MC LEAN

State  
VA

Zip Code  
22102-3388

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2027!

Amount of Each Disbursement this Period

[REDACTED] 136.96

Memo Item

Full Name (Last, First, Middle Initial)

### C. HISSHO SUSHI

Mailing Address ONE TERMINAL DRIVE SUITE 501

City  
NASHVILLE

State  
TN

Zip Code  
37214

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2022

Amount of Each Disbursement this Period

[REDACTED] 9.74

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HISSHO SUSHI**

Mailing Address ONE TERMINAL DRIVE SUITE 501

City  
NASHVILLE

State  
TN

Zip Code  
37214

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2022!

Amount of Each Disbursement this Period

[REDACTED] 9.74

Memo Item

Full Name (Last, First, Middle Initial)

**B. HISSHO SUSHI**

Mailing Address ONE TERMINAL DRIVE SUITE 501

City  
NASHVILLE

State  
TN

Zip Code  
37214

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2023!

Amount of Each Disbursement this Period

[REDACTED] 11.82

Memo Item

Full Name (Last, First, Middle Initial)

**C. HISTORIC ROYAL PALACES**

Mailing Address 21 THE CASEMATES THE TOWER OF LOND

City  
LONDON

State  
EC

Zip Code  
004AB

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2032

Amount of Each Disbursement this Period

[REDACTED] 352.98

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOOTSUITE**

Mailing Address 12 E 49TH ST

City  
NEW YORK

State  
NY

Zip Code  
10017

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2019**  
Amount of Each Disbursement this Period  
149.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I20287**  
Amount of Each Disbursement this Period  
260.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2030**  
Amount of Each Disbursement this Period  
154.92

Memo Item

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	07	/	2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2031!**  
Amount of Each Disbursement this Period  
[ ] 396.43

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOTELS.COM**

Mailing Address 5400 LBJ FREEWAY, SUITE 500

City  
DALLAS

State  
TX

Zip Code  
75240

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	07	/	2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2031!**  
Amount of Each Disbursement this Period  
[ ] 366.24

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTERNET RETAILING**

Mailing Address 69-79 FULHAM HIGH ST.

City  
LONDON

State  
SW

Zip Code  
003JW

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	07	/	2018

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2035**  
Amount of Each Disbursement this Period  
[ ] 410.15

Memo Item

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

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

[ ] 0.00
[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. INTUIT**

Mailing Address 2632 MARINE WAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1126

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2026'

Amount of Each Disbursement this Period

[REDACTED] 50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KLAVIYO**

Mailing Address 225 FRANKLIN ST,

City  
BOSTON

State  
MA

Zip Code  
02110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I20275

Amount of Each Disbursement this Period

[REDACTED] 3800.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. MIRROR ROOM**

Mailing Address ROSEWOOD LONDON

City  
LONDON

State  
C1

Zip Code  
007EN

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2034

Amount of Each Disbursement this Period

[REDACTED] 889.32

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OCEANAIRE SEAFOOD ROOM**

Mailing Address 1201 F ST NW

City  
WASHINGTON

State  
DC

Zip Code  
20004

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2024

Amount of Each Disbursement this Period

[REDACTED] 138.80

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAPERFORM**

Mailing Address 64 TABRETT ST, BANKSIA

City  
NSW 2216 AUSTRALIA

State  
FF

Zip Code  
99999

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I20274

Amount of Each Disbursement this Period

[REDACTED] 39.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. REBRANDLY**

Mailing Address 1355 MARKET STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94103

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2026

Amount of Each Disbursement this Period

[REDACTED] 52.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE ROYAL HORSEGUARDS HOTEL**

Mailing Address 2 WHITEHALL CT.

City  
LONDON

State  
SW

Zip Code  
002EJ

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2028:**  
Amount of Each Disbursement this Period  
[ ] 95.40 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. THE ROYAL HORSEGUARDS HOTEL**

Mailing Address 2 WHITEHALL CT.

City  
LONDON

State  
SW

Zip Code  
002EJ

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2033f**  
Amount of Each Disbursement this Period  
[ ] 149.22 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE ROYAL HORSEGUARDS HOTEL**

Mailing Address 2 WHITEHALL CT.

City  
LONDON

State  
SW

Zip Code  
002EJ

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2034**  
Amount of Each Disbursement this Period  
[ ] 137.03 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. THE ROYAL HORSEGUARDS HOTEL**

Mailing Address 2 WHITEHALL CT.

City LONDON State SW Zip Code 002EJ

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2034**  
 Amount of Each Disbursement this Period  
 296.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. TYPEFORM**

Mailing Address CARRER BAC DE RODA, 163

City BARCELONA State XX Zip Code 08018

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I20193**  
 Amount of Each Disbursement this Period  
 70.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City SAN FRANCISCO State CA Zip Code 94105-1611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼  
 State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2028**  
 Amount of Each Disbursement this Period  
 31.07

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2028**

Amount of Each Disbursement this Period

179.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2028**

Amount of Each Disbursement this Period

30.89

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C

**Transaction ID : SB21B.I2029**

Amount of Each Disbursement this Period

7.83

Memo Item

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

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

0.00



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2029I

Amount of Each Disbursement this Period

[REDACTED]	16.65
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2029I

Amount of Each Disbursement this Period

[REDACTED]	12.51
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	7			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2029I

Amount of Each Disbursement this Period

[REDACTED]	65.63
------------	-------

Memo Item

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

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

[REDACTED]	0.00
------------	------

[REDACTED]	
------------	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2029!**

Amount of Each Disbursement this Period

[ ] 10.81 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2030C**

Amount of Each Disbursement this Period

[ ] 15.88 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2030**

Amount of Each Disbursement this Period

[ ] 15.90 [ ]

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]



**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2030!**

Amount of Each Disbursement this Period

[REDACTED] 22.24

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2030!**

Amount of Each Disbursement this Period

[REDACTED] 69.19

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2030!**

Amount of Each Disbursement this Period

[REDACTED] 25.54

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2030!**

Amount of Each Disbursement this Period

[REDACTED] 65.01

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2031C**

Amount of Each Disbursement this Period

[REDACTED] 16.81

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2031**

Amount of Each Disbursement this Period

[REDACTED] 11.40

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2031  
Amount of Each Disbursement this Period

4.78

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2031  
Amount of Each Disbursement this Period

10.44

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I2031  
Amount of Each Disbursement this Period

19.55

Memo Item

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

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

0.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2031**

Amount of Each Disbursement this Period

[ ] 7.83

Memo Item

Full Name (Last, First, Middle Initial)

**B. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2031**

Amount of Each Disbursement this Period

[ ] 37.26

Memo Item

Full Name (Last, First, Middle Initial)

**C. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		07		2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I2034**

Amount of Each Disbursement this Period

[ ] 7.83

Memo Item

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

[ ] 0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UBER TECHNOLOGIES**

Mailing Address 182 HOWARD STREET, SUITE 8

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-1611

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2034!**

Amount of Each Disbursement this Period

[REDACTED] 11.73

Memo Item

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address P.O. BOX 66282

City  
CHICAGO

State  
IL

Zip Code  
60666-0282

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2028!**

Amount of Each Disbursement this Period

[REDACTED] 60.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address P.O. BOX 66282

City  
CHICAGO

State  
IL

Zip Code  
60666-0282

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2035**

Amount of Each Disbursement this Period

[REDACTED] 25.00

Memo Item

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

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

[REDACTED] 0.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2025**  
Amount of Each Disbursement this Period  
[ ] 84.65 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. US SENATE GIFT SHOP**

Mailing Address DIRKSEN SENATE OFFICE BUILDING

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2025**  
Amount of Each Disbursement this Period  
[ ] 165.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. VALHALLA GOLF CLUB**

Mailing Address 15503 SHELBYVILLE RD

City  
LOUISVILLE

State  
KY

Zip Code  
40243

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I2022**  
Amount of Each Disbursement this Period  
[ ] 201.40 [ ]

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
						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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. VENNGAGE

Mailing Address 1406-2 CARLTON STREET  
TORONTO, ONTARIO

City M5B1J5, CANADA State FF Zip Code 99999

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2019**  
Amount of Each Disbursement this Period  
49.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. VERIZON WIRELESS

Mailing Address P.O. BOX 25505

City LEHIGH VALLEY State PA Zip Code 18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2025**  
Amount of Each Disbursement this Period  
193.35

Memo Item

Full Name (Last, First, Middle Initial)

### C. VINCENZO'S

Mailing Address 150 S 5TH STREET

City LOUISVILLE State KY Zip Code 40202-3102

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.I2022**  
Amount of Each Disbursement this Period  
244.00

Memo Item

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

0.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WAL-MART**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE

State AR

Zip Code 72716-6209

Purpose of Disbursement OFFICE SUPPLIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 07 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I2025  
Amount of Each Disbursement this Period  
7.89

Memo Item

Full Name (Last, First, Middle Initial)

**B. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW

State CA

Zip Code 94043-1351

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I19771  
Amount of Each Disbursement this Period  
40.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW

State CA

Zip Code 94043-1351

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 02 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978  
Amount of Each Disbursement this Period  
40.00

Memo Item

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

80.00

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GOOGLE**

Mailing Address 1600 AMPHITHEATRE PARKWAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1351

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 04 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1979f

Amount of Each Disbursement this Period

40.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTEGRATED SOLUTIONS POLITICAL**

Mailing Address 4142 ADAMS AVENUE SUITE 103-550

City  
SAN DIEGO

State  
CA

Zip Code  
92116

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1977f

Amount of Each Disbursement this Period

960.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTEGRATED SOLUTIONS POLITICAL**

Mailing Address 4142 ADAMS AVENUE SUITE 103-550

City  
SAN DIEGO

State  
CA

Zip Code  
92116

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 03 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I1978

Amount of Each Disbursement this Period

960.00

Memo Item

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

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

1960.00

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. INTEGRATED SOLUTIONS POLITICAL**

Mailing Address 4142 ADAMS AVENUE SUITE 103-550

City SAN DIEGO State CA Zip Code 92116

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 05 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1979i

Amount of Each Disbursement this Period

[REDACTED] 960.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. KINDFUL**

Mailing Address 2975 SIDCO DRIVE

City NASHVILLE State TN Zip Code 37204

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 03 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I19777

Amount of Each Disbursement this Period

[REDACTED] 2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RMLC**

Mailing Address 113 E. MARKET STREET, SUITE 300

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement LIST RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 14 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1980

Amount of Each Disbursement this Period

[REDACTED] 15973.18

Memo Item

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

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

[REDACTED] 18933.18

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	4		2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1978I**

Amount of Each Disbursement this Period

145.30

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	2		2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1980I**

Amount of Each Disbursement this Period

74.34

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				0	3		2	0	1	8		

FEC Identification Number

**C**

**Transaction ID : SB21B.I1981I**

Amount of Each Disbursement this Period

160.55

Memo Item

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

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

380.19

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1981!**  
 Amount of Each Disbursement this Period  
 [ ] 1.03

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1981!**  
 Amount of Each Disbursement this Period  
 [ ] 38.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	1			2	0	1	8		

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1981!**  
 Amount of Each Disbursement this Period  
 [ ] 8.91

Memo Item

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

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

4	8	3	9
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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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1981!**

Amount of Each Disbursement this Period

[REDACTED] 169.38

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1982!**

Amount of Each Disbursement this Period

[REDACTED] 1.03

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	8

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I1982!**

Amount of Each Disbursement this Period

[REDACTED] 0.59

Memo Item

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

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

[REDACTED] 171.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1982**  
Amount of Each Disbursement this Period  
[ ] 3.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	9		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1982**  
Amount of Each Disbursement this Period  
[ ] 37.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1982**  
Amount of Each Disbursement this Period  
[ ] 2.78

Memo Item

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

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

4	3	7	7
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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 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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 24 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1982

Amount of Each Disbursement this Period: 56.27

Memo Item

**B. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 25 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1982

Amount of Each Disbursement this Period: 1.23

Memo Item

**C. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1982

Amount of Each Disbursement this Period: 0.45

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 57.95

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1983'**

Amount of Each Disbursement this Period

[ ] 3.56

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I19835**

Amount of Each Disbursement this Period

[ ] 0.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1983**

Amount of Each Disbursement this Period

[ ] 30.17

Memo Item

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

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

[ ] 34.61

[ ]

**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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 07 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1983i

Amount of Each Disbursement this Period: 0.33

Memo Item

**B. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 08 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1983i

Amount of Each Disbursement this Period: 26.03

Memo Item

**C. STRIPE**

Full Name (Last, First, Middle Initial)

Mailing Address 140 2ND STREET

City SAN FRANCISCO State CA Zip Code 94105-3727

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2018

FEC Identification Number: C

Transaction ID : SB21B.I1983i

Amount of Each Disbursement this Period: 52.35

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 78.71

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1984I

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1984I

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1984I

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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1984!**

Amount of Each Disbursement this Period

563.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1984!**

Amount of Each Disbursement this Period

235.78

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	8

FEC Identification Number

**C**

**Transaction ID : SB21B.I1984!**

Amount of Each Disbursement this Period

42.18

Memo Item

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

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

841.58

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1984

Amount of Each Disbursement this Period

[REDACTED]	19.76
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	8		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1984

Amount of Each Disbursement this Period

[REDACTED]	67.83
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1985

Amount of Each Disbursement this Period

[REDACTED]	107.20
------------	--------

Memo Item

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

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

[REDACTED]	194.79
------------	--------

[REDACTED]	
------------	--

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	0		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1985**  
Amount of Each Disbursement this Period

[ ] 19.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1985**  
Amount of Each Disbursement this Period

[ ] 8.74

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	4		2	0	1	8

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1985**  
Amount of Each Disbursement this Period

[ ] 30.63

Memo Item

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

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

[ ] 58.77

[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	5		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1985i

Amount of Each Disbursement this Period

[REDACTED] 0.59

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1985i

Amount of Each Disbursement this Period

[REDACTED] 79.93

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1986

Amount of Each Disbursement this Period

[REDACTED] 27.91

Memo Item

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

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

[REDACTED] 108.43

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1986'

Amount of Each Disbursement this Period

[REDACTED] 9.20

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I19862

Amount of Each Disbursement this Period

[REDACTED] 8.73

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1986

Amount of Each Disbursement this Period

[REDACTED] 32.58

Memo Item

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

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

[REDACTED] 50.51

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1986**  
Amount of Each Disbursement this Period  
[ ] 78.97

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1986**  
Amount of Each Disbursement this Period  
[ ] 22.84

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	8

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.I1987**  
Amount of Each Disbursement this Period  
[ ] 8.14

Memo Item

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

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

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
									109.95

[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
-----	-----	-----	-----	-----	-----	-----	-----	-----	-----

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I1987

Amount of Each Disbursement this Period

[ ] 5.70

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	1	9

FEC Identification Number

C [ ]

Transaction ID : SB21B.I1987

Amount of Each Disbursement this Period

[ ] 4.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	8

FEC Identification Number

C [ ]

Transaction ID : SB21B.I1987

Amount of Each Disbursement this Period

[ ] 1.03

Memo Item

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

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

[ ] 10.87

[ ]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1987f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1987g

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. STRIPE**

Mailing Address 140 2ND STREET

City  
SAN FRANCISCO

State  
CA

Zip Code  
94105-3727

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB21B.I1988

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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City WASHINGTON

State DC

Zip Code 20260

Purpose of Disbursement P.O. BOX RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978:  
Amount of Each Disbursement this Period  
630.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City LEHIGH VALLEY

State PA

Zip Code 18002-1025

Purpose of Disbursement PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1978:  
Amount of Each Disbursement this Period  
239.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City LEHIGH VALLEY

State PA

Zip Code 18002-1025

Purpose of Disbursement PHONE SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 29 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.I1979:  
Amount of Each Disbursement this Period  
298.53

Memo Item

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

1168.41

**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 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City  
LEHIGH VALLEY

State  
PA

Zip Code  
18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		2	8							2018

FEC Identification Number

C [ ]

**Transaction ID : SB21B.I1980!**

Amount of Each Disbursement this Period

[ ] 239.88

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 239.88

[ ] 152095.01

# 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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. GLISSON FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 6063

City LOUISVILLE State KY Zip Code 40206

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**GLISSON, VICKIE YATES BROWN, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: KY District: 03

Date of Disbursement: 09 / 19 / 2018

FEC Identification Number: C00668699  
Transaction ID : SB23.I19887  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> 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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DILWORTH, EVAN, , ,**

Mailing Address 4007 MCCULLOUGH AVE #472

City  
SAN ANTONIO

State  
TX

Zip Code  
78212

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB28A.I1988'

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. HEAVIN, H., , ,**

Mailing Address 875 COUNTY ROAD 324

City  
GATESVILLE

State  
TX

Zip Code  
76528

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB28A.I1980f

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. POWELL, SAM, , ,**

Mailing Address P.O. BOX 704

City  
MALDEN

State  
MO

Zip Code  
63863

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

Transaction ID : SB28A.I1982

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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. ROSE, LESLIE, , ,**

Mailing Address 140 ATLANTIC AVE.

City  
PALM BEACH,

State  
FL

Zip Code  
33480

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

FEC Identification Number

C [ ]

**Transaction ID : SB28A.I1981;**  
Amount of Each Disbursement this Period

[ ] 3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 3500.00

[ ] 11400.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DANNY CARROLL FOR STATE SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2018

Mailing Address 220 CIMARRON WAY

FEC Identification Number

**C** [ ]  
**Transaction ID : SB29.I19895**  
 Amount of Each Disbursement this Period  
 [ ] 1000.00

City PADUCAH State KY Zip Code 42001

Purpose of Disbursement  
POLITICAL CONTRIBUTION

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**B. ERNIE HARRIS FOR STATE SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2018

Mailing Address P.O. BOX 1073

FEC Identification Number

**C** [ ]  
**Transaction ID : SB29.I19894**  
 Amount of Each Disbursement this Period  
 [ ] 1000.00

City CRESTWOOD State KY Zip Code 40014

Purpose of Disbursement  
POLITICAL CONTRIBUTION

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
 State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C. KY SENATE REPUBLICAN CAUCUS CAMPAIGN CMTE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	26	/	2018

Mailing Address P.O. BOX 1072

FEC Identification Number

**C** [ ]  
**Transaction ID : SB29.I19893**  
 Amount of Each Disbursement this Period  
 [ ] 2500.00

City FRANKFORT State KY Zip Code 40602

Purpose of Disbursement  
POLITICAL CONTRIBUTION

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼  
 State: District:

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

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MATT CASTLEN FOR STATE SENATE**

Mailing Address 2625 WRIGHTS LANDING ROAD

City OWENSBORO State KY Zip Code 42303

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C  
Transaction ID : SB29.I19888  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAUL HORNBACK FOR STATE SENATE**

Mailing Address 6102 CROPPER ROAD

City SHELBYVILLE State KY Zip Code 40065

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C  
Transaction ID : SB29.I19891  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBBY MILLS FOR STATE SENATE**

Mailing Address 2392 COBBLESTONE DRIVE

City HENDERSON State KY Zip Code 42420

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 26 / 2018

FEC Identification Number

C  
Transaction ID : SB29.I19890  
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)..... ▶

3000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. WIL SCHRODER FOR STATE SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2018

Mailing Address 25 OBSERVATORY POINTE DRIVE

FEC Identification Number

C
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**Transaction ID : SB29.I19889**  
Amount of Each Disbursement this Period

1000.00
---------

Memo Item

City WILDER State KY Zip Code 41071

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. MIKE WILSON FOR STATE SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2018

Mailing Address 631 WASHINGTON AVENUE

FEC Identification Number

C
---

**Transaction ID : SB29.I19892**  
Amount of Each Disbursement this Period

1000.00
---------

Memo Item

City BOWLING GREEN State KY Zip Code 42103

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. REX MCWHORTER FOR MAGISTRATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2018

Mailing Address 3523 CEMETERY ROAD

FEC Identification Number

C
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**Transaction ID : SB29.I19886**  
Amount of Each Disbursement this Period

750.00
--------

Memo Item

City BOWLING GREEN State KY Zip Code 42103

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

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

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

2750.00
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10250.00
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