

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

POLICE OFFICERS DEFENSE ALLIANCE LLC

ADDRESS (number and street) 4712 El Presidente Dr

Check if different than previously reported. (ACC) LAS VEGAS NV 89129

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

C C00667865

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

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- Primary (12P) General (12G) Runoff (12R)
 - Convention (12C) Special (12S)
- Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- General (30G) Runoff (30R) Special (30S)
- Election on / / in the State of

5. Covering Period 11 / 27 / 2018 through 12 / 31 / 2018

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

Pollock, Kecia, Marie, ,

Type or Print Name of Treasurer

Signature of Treasurer Pollock, Kecia, Marie, , [Electronically Filed] Date 01 / 29 / 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.

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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

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"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15047.23"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="224705.36"/>	<input type="text" value="624367.22"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="239752.59"/>	<input type="text" value="624367.22"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="131834.39"/>	<input type="text" value="516484.02"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="107918.20"/>	<input type="text" value="107918.20"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

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).....	8210.00	11580.00
(ii) Unitemized	216495.36	602787.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	224705.36	614367.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	224705.36	614367.22
12. Transfers From Affiliated/Other Party Committees.....	0.00	10000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	224705.36	624367.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	224705.36	624367.22

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	131834.39	496484.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	131834.39	496484.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	20000.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	131834.39	516484.02
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	131834.39	516484.02

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	224705.36	614367.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	224705.36	614367.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	131834.39	496484.02
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	131834.39	496484.02

**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 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. ADAMS, JUDITH, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 SPRING HARBOR DR
APT 762

City COLUMBUS	State GA	Zip Code 31904
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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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	24	/	2018

Transaction ID : SA11AI-14711317

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 932 CHARLTON ST

City SAINT PAUL	State MN	Zip Code 55118
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Best Efforts	Occupation (for Individual) truck driver
---	---

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
12	/	07	/	2018

Transaction ID : SA11AI-14724113

Amount of Each Receipt this Period
350.00

Memo Item

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

Mailing Address 744 S OAK ST

City HINSDALE	State IL	Zip Code 60521
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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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2018

Transaction ID : SA11AI-14725603

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. BRUNSON, GWENDOLYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 MEETINGHOUSE RDG
 City MERIDEN State CT Zip Code 06450
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ATTORNEY Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 10 / 2018
Transaction ID : SA11AI-14722569
 Amount of Each Receipt this Period 300.00
 Memo Item

B. FELICIANO, EDGAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 772 JAMACSA RD UNIT 405
 City EL CAJON State CA Zip Code 92019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELITE BODY BY EDDY Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 10 / 2018
Transaction ID : SA11AI-14721829
 Amount of Each Receipt this Period 300.00
 Memo Item

C. GOSAN, PATRICIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 APOGEE DR
 City INDIAN TRAIL State NC Zip Code 28079
 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 ▼ 200.00

Date of Receipt 12 / 06 / 2018
Transaction ID : SA11AI-14724979
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. GRUBB, WILLIAM R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6015 W 119TH ST
 APT 2110
 City OVERLAND PARK State KS Zip Code 66209
 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 12 / 07 / 2018
Transaction ID : SA11AI-14723497
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. HAMBRICK, JOSEPHINE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 529 6TH ST NW
 City HICKORY State NC Zip Code 28601
 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 12 / 26 / 2018
Transaction ID : SA11AI-14713065
 Amount of Each Receipt this Period 300.00
 Memo Item

C. HEJAZIN, KHALED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 E SCHROCK RD
 City WESTERVILLE State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 12 / 05 / 2018
Transaction ID : SA11AI-14725647
 Amount of Each Receipt this Period 210.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1510.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 21
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. LARSEN, JENNIFER D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2985 BROOKSIDE DR
 City GRAND JUNCTION State CO Zip Code 81504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 07 / 2018
Transaction ID : SA11AI-14723347
 Amount of Each Receipt this Period 200.00
 Memo Item

B. LORD, GEOFFREY S, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 SWIFT WIND PL
 City WILMINGTON State NC Zip Code 28405
 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 ▼ 200.00

Date of Receipt 12 / 06 / 2018
Transaction ID : SA11AI-14725367
 Amount of Each Receipt this Period 200.00
 Memo Item

C. MURPHY, CHARLES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 421 ELWOOD CT
 City ARGYLE State TX Zip Code 76226
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) MORGAGE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 05 / 2018
Transaction ID : SA11AI-14725787
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 21
<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. MUSSELMAN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1609 TEMPLE HILLS DR
 City LAGUNA BEACH State CA Zip Code 92651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 08 / 2018
Transaction ID : SA11AI-14722827
 Amount of Each Receipt this Period 500.00
 Memo Item

B. OGAREVA, OLGA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 672 W PARR AVE
 City CAMPBELL State CA Zip Code 95008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) STANFFORD HOSPITAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2018
Transaction ID : SA11AI-14710225
 Amount of Each Receipt this Period 200.00
 Memo Item

C. OLDING, TARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7067 W INA RD
 City TUCSON State AZ Zip Code 85743
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GENERAL CONTRACTOR Occupation (for Individual) GENERAL CONTRACTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 13 / 2018
Transaction ID : SA11AI-14719969
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 21
<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

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

Mailing Address 1920 MARGARET ST

City SAINT PAUL	State MN	Zip Code 55119
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Retired	Occupation (for Individual) Retired
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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
12	/	06	/	2018

Transaction ID : SA11AI-14725349

Amount of Each Receipt this Period
350.00

Memo Item

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

Mailing Address 51 SPIKERUSH CIR

City AMERICAN CANYON	State CA	Zip Code 94503
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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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2018

Transaction ID : SA11AI-14718793

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 9430 W 111TH TER

City OVERLAND PARK	State KS	Zip Code 66210
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FEC ID number of contributing federal political committee. **C**

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

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2018

Transaction ID : SA11AI-14724057

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. RHOADES, BRIAN L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49W020 SCOTT RD
 City BIG ROCK State IL Zip Code 60511
 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 ▼ 200.00

Date of Receipt 12 / 06 / 2018
Transaction ID : SA11AI-14724595
 Amount of Each Receipt this Period 200.00
 Memo Item

B. ROSS, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3052 W HIGHWAY 199
 City SPRINGTOWN State TX Zip Code 76082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) TELECOMMUNICATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2018
Transaction ID : SA11AI-14709143
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SAVAGE, BETTY A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 717 W COPELAND DR
 City POWELL State TN Zip Code 37849
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HELLEN ROSSMAN Occupation (for Individual) art specialist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 08 / 2018
Transaction ID : SA11AI-14722995
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. SEAMAN, ROBERT D, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 487 COUNTY ROAD 812

City BUNA	State TX	Zip Code 77612
--------------	-------------	-------------------

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

Name of Employer (for Individual) Best Efforts	Occupation (for Individual) OIL FIELD CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2018
Transaction ID : SA11AI-14723891

Amount of Each Receipt this Period
 200.00

Memo Item

B. SHUMAKER, JOANNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1117 JADE DR

City BEL AIR	State MD	Zip Code 21014
-----------------	-------------	-------------------

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

Name of Employer (for Individual) LEIDOS	Occupation (for Individual) Best Efforts
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2018
Transaction ID : SA11AI-14724887

Amount of Each Receipt this Period
 500.00

Memo Item

C. SMITH, BARBARA A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1850 NW 116TH TER

City OCALA	State FL	Zip Code 34482
---------------	-------------	-------------------

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 ▼
200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2018
Transaction ID : SA11AI-14725663

Amount of Each Receipt this Period
 200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 21
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. STUMPF, JOSHUA J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20842 N 102ND ST
 City SCOTTSDALE State AZ Zip Code 85255
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 15 / 2018
Transaction ID : SA11AI-14719011
 Amount of Each Receipt this Period 200.00
 Memo Item

B. ULLRICH, BERNITA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3713 SPRING RIVER RD
 City ROSWELL State NM Zip Code 88203
 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 ▼ 200.00

Date of Receipt 12 / 06 / 2018
Transaction ID : SA11AI-14725227
 Amount of Each Receipt this Period 200.00
 Memo Item

C. WOODBURN, JOHN A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3859 LAKE RUN BLVD
 City STOW State OH Zip Code 44224
 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 12 / 10 / 2018
Transaction ID : SA11AI-14722215
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	8210.00

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Pollock, Kecia M, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24975

Amount of Each Disbursement this Period: 1612.00

Memo Item

B. Pollock, William, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24976

Amount of Each Disbursement this Period: 227.87

Memo Item

C. Pollock, Kecia M, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B-2497!

Amount of Each Disbursement this Period: 1675.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3514.87

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Pollock, William, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24976

Amount of Each Disbursement this Period: 230.00

Memo Item

B. American Technology Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street Unit 110 Box 241

City Phoenix State AZ Zip Code 85250

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 28 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24955

Amount of Each Disbursement this Period: 127.20

Memo Item

C. American Technology Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street Unit 110 Box 241

City Phoenix State AZ Zip Code 85250

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24951

Amount of Each Disbursement this Period: 92.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 449.68

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 12 / 12 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [REDACTED] Transaction ID : SB21B-24955 Amount of Each Disbursement this Period 19832.64	
City Phoenix	State AZ	Zip Code 85250	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) B. American Technology Services LLC			Date of Disbursement MM / DD / YYYY 12 / 19 / 2018	
Mailing Address 125 North 2nd Street Unit 110 Box 241			FEC Identification Number C [REDACTED] Transaction ID : SB21B-24955 Amount of Each Disbursement this Period 23579.20	
City Phoenix	State AZ	Zip Code 85250	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Software Licensing		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) C. Compliance Consultants LLC			Date of Disbursement MM / DD / YYYY 11 / 28 / 2018	
Mailing Address 1345 N Jefferson St #454			FEC Identification Number C [REDACTED] Transaction ID : SB21B-2496: Amount of Each Disbursement this Period 180.54	
City Milwaukee	State WI	Zip Code 53202	Memo Item <input type="checkbox"/>	
Purpose of Disbursement credit card pmt processing and verifications		Category/ Type 001		
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:				

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

43592.38

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 N Jefferson St
#454

M M M	/	D D D	/	Y Y Y Y Y
12		05		2018

City Milwaukee State WI Zip Code 53202

FEC Identification Number

Purpose of Disbursement credit card pmt processing and verifications

001
Category/Type

C
Transaction ID : SB21B-24963
Amount of Each Disbursement this Period
131.26

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:	

Memo Item

B. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 N Jefferson St
#454

M M M	/	D D D	/	Y Y Y Y Y
12		12		2018

City Milwaukee State WI Zip Code 53202

FEC Identification Number

Purpose of Disbursement credit card pmt processing and verifications

001
Category/Type

C
Transaction ID : SB21B-24963
Amount of Each Disbursement this Period
28149.50

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:	

Memo Item

C. Compliance Consultants LLC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1345 N Jefferson St
#454

M M M	/	D D D	/	Y Y Y Y Y
12		19		2018

City Milwaukee State WI Zip Code 53202

FEC Identification Number

Purpose of Disbursement credit card pmt processing and verifications

001
Category/Type

C
Transaction ID : SB21B-24963
Amount of Each Disbursement this Period
33467.27

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:	

Memo Item

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

61748.03

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

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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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. Cox Communications, Inc.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			26			2018			

Mailing Address 6205-B Peachtree Dunwoody Road NE

FEC Identification Number

C []

Transaction ID : SB21B-24965
Amount of Each Disbursement this Period

[] 170.23

Memo Item

City Atlanta State GA Zip Code 30328

Purpose of Disbursement Business Phones Category/Type 001

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			28			2018			

Mailing Address 1350 W. Southport Road Box 130

FEC Identification Number

C []

Transaction ID : SB21B-24970
Amount of Each Disbursement this Period

[] 62.40

Memo Item

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement caging and escrow Category/Type 003

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			05			2018			

Mailing Address 1350 W. Southport Road Box 130

FEC Identification Number

C []

Transaction ID : SB21B-24971
Amount of Each Disbursement this Period

[] 42.90

Memo Item

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement caging and escrow Category/Type 003

Candidate Name

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

State: District:

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

[] 275.53

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Unified Data Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement caging and escrow

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 12 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24970

Amount of Each Disbursement this Period: 9597.90

Memo Item

B. Unified Data Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1350 W. Southport Road
Box 130

City Indianapolis State IN Zip Code 46217

Purpose of Disbursement caging and escrow

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 19 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24970

Amount of Each Disbursement this Period: 11407.50

Memo Item

C. United States Treasury

Full Name (Last, First, Middle Initial)

Mailing Address 1500 Pennsylvania Avenue
NW

City Washington State DC Zip Code 20003

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 10 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24970

Amount of Each Disbursement this Period: 582.26

Memo Item

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

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

21587.66

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. United States Treasury

Full Name (Last, First, Middle Initial)

Mailing Address 1500 Pennsylvania Avenue NW

City Washington State DC Zip Code 20003

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 21 / 2018

FEC Identification Number: C

Transaction ID : SB21B-24976

Amount of Each Disbursement this Period: 516.24

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

SUBTOTAL of Disbursements This Page (optional).....▶	516.24
TOTAL This Period (last page this line number only).....▶	131684.39