

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 True North PAC

ADDRESS (number and street) 901 N Washington St, Suite 700 Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER C00571000 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 04 / 01 / 2018 through 06 / 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. Koch, Timothy A., , , Type or Print Name of Treasurer

Signature of Treasurer Koch, Timothy A., , , [Electronically Filed] Date 07 / 13 / 2018

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

True North PAC

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"/>		108922.64
(b) Cash on Hand at Beginning of Reporting Period.....	64659.27	
(c) Total Receipts (from Line 19) .....	138950.00	175626.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	203609.27	284549.14
7. Total Disbursements (from Line 31).....	116076.61	197016.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	87532.66	87532.66
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) .....	1270.00	

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

**True North PAC**

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2018 To: M M / D D / Y Y Y Y 06 / 30 / 2018

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).....	65750.00	78750.00
(ii) Unitemized .....	200.00	376.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	65950.00	79126.50
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	73000.00	96500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	138950.00	175626.50
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	138950.00	175626.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	138950.00	175626.50

**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 .....	61076.61	122016.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	61076.61	122016.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	75000.00
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 .....	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)) ..	116076.61	197016.48
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116076.61	197016.48

**DETAILED SUMMARY PAGE**  
of Disbursements

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<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) .....	138950.00	175626.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	138950.00	175626.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	61076.61	122016.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	61076.61	122016.48

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

Form/Schedule: F3XN  
Transaction ID :

For the negative debt accruals for Jones Day and Laura Rizzo, these represent corrections in amounts to the original invoices presented.

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 42  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**True North PAC**

**A. Arison, Madeleine, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Alhambra Plz, Suite 1040  
 City Coral Gables State FL Zip Code 33134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) M&M Arison Family Foundation Occupation (for Individual) Founder  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 11 / 2018  
**Transaction ID : SA11AI.5721**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Arison, Micky, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Alhambra Plz, Suite 1040  
 City Coral Gables State FL Zip Code 33154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carnival Cruise Lines Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 11 / 2018  
**Transaction ID : SA11AI.5718**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Betz, Nathaniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 836 M St #113  
 City Anchorage State AK Zip Code 99501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Coastal Villages Region Fund Occupation (for Individual) Community Development  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 05 / 14 / 2018  
**Transaction ID : SA11AI.5722**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00  
**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 8 OF 42  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**True North PAC**

**A. Binkley, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5325 Chena Small Tracts  
 City Fairbanks State AK Zip Code 99709  
 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 04 / 30 / 2018  
**Transaction ID : SA11AI.5699**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Binkley, Judy, Gray, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5325 Chena Small Tracts  
 City Fairbanks State AK Zip Code 99709  
 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 04 / 30 / 2018  
**Transaction ID : SA11AI.5701**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Cobb, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 144200  
 City Coral Gables State FL Zip Code 33114  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cobb Partners Occupation (for Individual) Self Employed  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 25 / 2018  
**Transaction ID : SA11AI.5695**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11000.00  
**TOTAL** This Period (last page this line number only)..... ▶



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 42
	<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)  
**True North PAC**

**A. Donnell, Maureen, N., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1690 S Ocean Blvd  
 City Palm Beach State FL Zip Code 33480  
 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 04 / 16 / 2018  
**Transaction ID : SA11AI.5660**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Fain, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 Arvida Pkwy  
 City Coral Gables State FL Zip Code 33156  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Royal Caribbean Cruises Ltd. Occupation (for Individual) Chairman & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 11 / 2018  
**Transaction ID : SA11AI.5713**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item Contribution

**C. Gilman, Bradley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Talahi Road SE  
 City Vienna State VA Zip Code 22180  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Hoffman Silver Gilman & Biasco Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 11 / 2018  
**Transaction ID : SA11AI.5709**  
 Amount of Each Receipt this Period 250.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7750.00
<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 42
	<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)  
**True North PAC**

**A. Graham, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 14980 Karl Ave  
 City Monte Sereno State CA Zip Code 95030  
 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 **04 / 27 / 2018**  
**Transaction ID : SA11AI.5697**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**B. Henderson, James, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4228 N Riverside Dr  
 City Columbus State IN Zip Code 47203  
 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 **05 / 31 / 2018**  
**Transaction ID : SA11AI.5741**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. Johnson, Charles, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1220 South Ocean Boulevard  
 City Palm Beach State FL Zip Code 33480  
 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 **04 / 12 / 2018**  
**Transaction ID : SA11AI.5659**  
 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 11 OF 42
	<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)  
**True North PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Kalisch, Eleni, P., ,</b>		Date of Receipt MM / DD / YYYY 05 / 11 / 2018 <b>Transaction ID : SA11AI.5710</b>
Mailing Address 1925 Brickell Ave #1511		Amount of Each Receipt this Period 1000.00
City Miami	State FL	Zip Code 33129
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contributions
Name of Employer (for Individual) Royal Caribbean Cruises Ltd.	Occupation (for Individual) VP, Federal Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Karman, Christopher, James, ,</b>		Date of Receipt MM / DD / YYYY 04 / 27 / 2018 <b>Transaction ID : SA11AI.5696</b>
Mailing Address 29 Fox Trace Lane		Amount of Each Receipt this Period 1000.00
City Hudson	State OH	Zip Code 44236
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Red Coach Properties, LLC	Occupation (for Individual) President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Karman, James, , ,</b>		Date of Receipt MM / DD / YYYY 05 / 16 / 2018 <b>Transaction ID : SA11AI.5729</b>
Mailing Address 110 Seaspray Ave		Amount of Each Receipt this Period 1000.00
City Palm Beach	State FL	Zip Code 33480
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item Contribution
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<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 42
	<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)  
**True North PAC**

**A. Kennedy, Charles, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 574 Marygate Dr  
 City Bay Village State OH Zip Code 44140  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Packaging Corp. of America Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 04 / 10 / 2018  
**Transaction ID : SA11AI.5657**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**B. RMS Investment Group, LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Public Square Ste 1600  
 City Cleveland State OH Zip Code 44113  
 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 ▼ 5000.00

Date of Receipt 05 / 22 / 2018  
**Transaction ID : SA11AI.5735**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item See Attribution Below

**C. Ratner, Chuck, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 50 Public Square Ste 1600  
 City Cleveland State OH Zip Code 44113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RMS Investment Group, Inc. Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 22 / 2018  
**Transaction ID : SA11AI.5735.0**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Partnership Attribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<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 42
	<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)  
**True North PAC**

**A. Rubin, Joshua, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6604 Westpoint Drive  
 City Hudson State OH Zip Code 44236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CJR Group, Inc Occupation (for Individual) Consultant  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 10 / 2018  
**Transaction ID : SA11AI.5658**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item Contribution

**B. Sullivan, Frank, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2628 Pearl Rd  
 City Medina State OH Zip Code 44256  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RPM International Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4676.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 04 / 06 / 2018  
**Transaction ID : SA11AI.5635**  
 Amount of Each Receipt this Period  
 4500.00  
 Memo Item Contribution

**C. Wendt, Gregory, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Market Street Ste 2000  
 City San Francisco State CA Zip Code 94105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cap. Research Global Investors Occupation (for Individual) Partner  
 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  
 04 / 16 / 2018  
**Transaction ID : SA11AI.5662**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11500.00
<b>TOTAL</b> This Period (last page this line number only).....	65750.00

**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 14 OF 42
<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)  
**True North PAC**

**A. AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

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

Mailing Address 421 AVIATION WAY

City FREDERICK	State MD	Zip Code 21701
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00131185

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
06		28		2018

**Transaction ID : SA11C.5790**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. AMERICAN CHEMISTRY COUNCIL PAC**

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

Mailing Address 700 2ND STREET, NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00252338

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2018

**Transaction ID : SA11C.5796**

Amount of Each Receipt this Period  
3500.00

Memo Item Contribution

**C. AMERICAN WATERWAYS OPERATORS-PAC**

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

Mailing Address 801 N. QUINCY STREET, SUITE 200

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00034678

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
06		30		2018

**Transaction ID : SA11C.5806**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<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 42
<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)  
**True North PAC**

**A. BRYAN CAVE LLP POLITICAL ACTION COMMITTEE**

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

Mailing Address 1155 F STREET NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00332643

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2018

**Transaction ID : SA11C.5714**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

**B. CHUGACH ALASKA CORPORATION PAC AKA CAC PAC**

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

Mailing Address 3800 CENTERPOINT DRIVE SUITE 1200

City ANCHORAGE State AK Zip Code 99503

FEC ID number of contributing federal political committee. **C** C00564377

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2018

**Transaction ID : SA11C.5717**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C. CRUISE LINES INTERNATIONAL ASSOCIATION PAC (CLIA PAC)**

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

Mailing Address 1201 F STREET NW  
SUITE 250

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00432393

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2018

**Transaction ID : SA11C.5715**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<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 42
<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)  
**True North PAC**

**A. DELTA AIR LINES POLITICAL ACTION COMMITTEE**

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

Mailing Address 1212 NEW YORK AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00104802

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2018

**Transaction ID : SA11C.5748**

Amount of Each Receipt this Period  
3500.00

Memo Item Contribution

**B. FAA MANAGERS ASSOCIATION INC. PAC**

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

Mailing Address 1015 ATLANTIC BLVD.  
SUITE 245

City ATLANTIC BEACH State FL Zip Code 32233

FEC ID number of contributing federal political committee. **C** C00366070

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2018

**Transaction ID : SA11C.5799**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C. GCI COMMUNICATION CORP. PAC (GCI PAC)**

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

Mailing Address 1900 L STREET, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00387894

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4000.00

Date of Receipt  
MM / DD / YYYY  
04 / 03 / 2018

**Transaction ID : SA11C.5628**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	9500.00
<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 42
<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)  
**True North PAC**

**A. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25 MASSACHUSETTS AVENUE, NW  
 SUITE 400  
 City WASHINGTON State DC Zip Code 20001  
 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 ▼ 3500.00

Date of Receipt **06 / 08 / 2018**  
**Transaction ID : SA11C.5742**  
 Amount of Each Receipt this Period 3500.00  
 Memo Item Contribution

**B. NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4300 WILSON BLVD  
 SUITE 400  
 City ARLINGTON State VA Zip Code 22203  
 FEC ID number of contributing federal political committee. **C** C00113241  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **05 / 16 / 2018**  
**Transaction ID : SA11C.5730**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item Contribution

**C. NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1771 N STREET NW  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **06 / 30 / 2018**  
**Transaction ID : SA11C.5808**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 11500.00  
**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 42
<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)  
**True North PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NCTA - THE INTERNET AND TELEVISION ASSOCIATION POLITICAL ACTION COMMITTEE (NCTA PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW #100

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

FEC ID number of contributing federal political committee. **C** C00010082

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

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
05	/	11	/	2018

**Transaction ID : SA11C.5712**

Amount of Each Receipt this Period  
1500.00

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE

Mailing Address 801 PENNSYLVANIA AVE., NW SUITE 220

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064774

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
06	/	18	/	2018

**Transaction ID : SA11C.5758**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
PACIFIC SEAFOOD PROCESSORS POLITICAL ACTION COMMITTEE (PSPAC)

Mailing Address 1900 W EMERSON PLACE STE 205

City SEATTLE	State WA	Zip Code 98119
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00193672

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
06	/	28	/	2018

**Transaction ID : SA11C.5791**

Amount of Each Receipt this Period  
2500.00

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<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 42
<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)  
**True North PAC**

**A. PRINTING INDUSTRIES OF AMERICA**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1325 G STREET NW SUITE 500

City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00018028		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
04 / 09 / 2018  
**Transaction ID : SA11C.5653**

Amount of Each Receipt this Period  
1000.00

Memo Item Contribution

**B. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00010470		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2018  
**Transaction ID : SA11C.5747**

Amount of Each Receipt this Period  
5000.00

Memo Item Contribution

**C. UNITED STATES TELECOM ASSOCIATION POLITICAL ACTION COMMITTEE (TELECOMPAC)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 607 14TH STREET NORTHWEST SUITE 400

City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00000984		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2018  
**Transaction ID : SA11C.5787**

Amount of Each Receipt this Period  
1000.00

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 20 OF 42
<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)  
**True North PAC**

**A. VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **ONE VALERO WAY**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78249</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00109546**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**06 / 28 / 2018**

**Transaction ID : SA11C.5797**

Amount of Each Receipt this Period  
**5000.00**

Memo Item Contribution

**B. VERIZON COMMUNICATIONS, INC. POLITICAL ACTION COMMITTEE (VERIZON PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **1300 I ST NW, STE 500 EAST  
ATTN: TAYLOR CRAIG**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00186288**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**3000.00**

Date of Receipt  
**06 / 28 / 2018**

**Transaction ID : SA11C.5793**

Amount of Each Receipt this Period  
**3000.00**

Memo Item Contribution

**C. VISA, INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address **325 7TH STREET, NW  
SUITE 800**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00365122**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
**3000.00**

Date of Receipt  
**06 / 28 / 2018**

**Transaction ID : SA11C.5794**

Amount of Each Receipt this Period  
**3000.00**

Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>11000.00</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: PAGE 21 OF 42  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**True North PAC**

**A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 702 S.W. 8TH STREET  
 City BENTONVILLE State AR Zip Code 72716  
 FEC ID number of contributing federal political committee. **C** C00093054  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 28 / 2018  
**Transaction ID : SA11C.5789**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item Contribution

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	73000.00

**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)  
**True North PAC**

**A. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement  
Credit Card Payment: See Memos

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 17 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.5664  
Amount of Each Disbursement this Period: 6424.81

Memo Item

**B. American Express**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement  
Vendor Rebate

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 15 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.5664.c  
Amount of Each Disbursement this Period: - 56.70

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement  
Vendor Credit: Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 21 / 2018

FEC Identification Number: C  
Transaction ID : SB21B.5664.  
Amount of Each Disbursement this Period: - 426.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6424.81

**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)  
**True North PAC**

Full Name (Last, First, Middle Initial)  
**A. Alaska Airlines**

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168

Purpose of Disbursement Vendor Credit: Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 28 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.3

Amount of Each Disbursement this Period: - 192.70

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Hertz**

Mailing Address 600 Terminal Dr

City Fort Lauderdale State FL Zip Code 33315

Purpose of Disbursement Vendor Rebate: Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 02 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.3

Amount of Each Disbursement this Period: - 18.35

Memo Item

Full Name (Last, First, Middle Initial)  
**C. United Airlines**

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 15 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.3

Amount of Each Disbursement this Period: 40.00

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)  
**True North PAC**

**A. United Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5664.!**

Amount of Each Disbursement this Period: 208.24

Memo Item

**B. Central Michel Richard**

Full Name (Last, First, Middle Initial)  
Mailing Address 1001 Pennsylvania Ave NW

City Washington State DC Zip Code 20004

Purpose of Disbursement PAC Event Expense: Food & Beverage

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 20 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5664.7**

Amount of Each Disbursement this Period: 1687.08

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 23 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5664.**

Amount of Each Disbursement this Period: 1190.31

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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Waldorf La Quinta Resort &amp; Club</b>		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address 49499 Eisenhowe Drive		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5664.</b> Amount of Each Disbursement this Period [ ] 1015.74
City La Quinta	State CA	Zip Code 92253
Purpose of Disbursement PAC Event Expense: Lodging/Food & Beverage		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. Emerald Transportation Service</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2018
Mailing Address PO Box 133		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5664.1</b> Amount of Each Disbursement this Period [ ] 513.00
City Palm Desert	State CA	Zip Code 92261
Purpose of Disbursement PAC Event Expense: Transportation		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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2018
Mailing Address 4255 Amon Carter Blvd.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5664.</b> Amount of Each Disbursement this Period [ ] 296.30
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement PAC Airfare		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)  
**True North PAC**

Full Name (Last, First, Middle Initial)  
**A. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PAC Airfare Expense

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.1

Amount of Each Disbursement this Period: 36.96

Memo Item

Full Name (Last, First, Middle Initial)  
**B. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 27 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.1

Amount of Each Disbursement this Period: 431.20

Memo Item

Full Name (Last, First, Middle Initial)  
**C. United Airlines**

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 03 / 14 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.1

Amount of Each Disbursement this Period: 253.60

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)  
**True North PAC**

**A. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.1

Amount of Each Disbursement this Period: 582.05

Memo Item

**B. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.2

Amount of Each Disbursement this Period: 25.00

Memo Item

**C. United Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5664.

Amount of Each Disbursement this Period: 132.00

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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Hertz</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2018
Mailing Address 600 Terminal Dr		FEC Identification Number C <b>Transaction ID : SB21B.5664.</b> Amount of Each Disbursement this Period 366.97
City Fort Lauderdale	State FL	
Zip Code 33315		Category/ Type
Purpose of Disbursement PAC Car Rental		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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>B. American Express</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2018
Mailing Address PO Box 650448		FEC Identification Number C <b>Transaction ID : SB21B.5724</b> Amount of Each Disbursement this Period 1078.59
City Dallas	State TX	
Zip Code 75265		Category/ Type
Purpose of Disbursement Credit Card Payment: See Memos		
Candidate Name		Memo Item <input type="checkbox"/>
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>C. American Express</b>		Date of Disbursement MM / DD / YYYY 04 / 13 / 2018
Mailing Address PO Box 650448		FEC Identification Number C <b>Transaction ID : SB21B.5724.</b> Amount of Each Disbursement this Period - 129.71
City Dallas	State TX	
Zip Code 75265		Category/ Type
Purpose of Disbursement Vendor Rebate		
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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)..... ▶

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

1078.59

**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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Bistro Bis</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2018
Mailing Address 15 E St. NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5724.</b> Amount of Each Disbursement this Period [ ] 1192.31
City Washington	State DC	Zip Code 20001
Purpose of Disbursement PAC Event Expense: Food & Beverage		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. American Express</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2018
Mailing Address PO Box 650448		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5749</b> Amount of Each Disbursement this Period [ ] 2310.63
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Credit Card Payment: See Memos		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. American Express</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2018
Mailing Address PO Box 650448		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5749.</b> Amount of Each Disbursement this Period [ ] - 66.20
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Vendor Rebate		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).....▶	[ ] 2310.63
<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)  
**True North PAC**

Full Name (Last, First, Middle Initial)

**A. Alaska Airlines**

Mailing Address PO Box 68900

City  
Seattle

State  
WA

Zip Code  
98168

Purpose of Disbursement  
PAC Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 16 / 2018

FEC Identification Number

C

Transaction ID : **SB21B.5749.**  
Amount of Each Disbursement this Period

1596.40

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cartwright Hotel Union Square**

Mailing Address 524 Sutter St

City  
San Francisco

State  
CA

Zip Code  
94102

Purpose of Disbursement  
PAC Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 18 / 2018

FEC Identification Number

C

Transaction ID : **SB21B.5749.2**  
Amount of Each Disbursement this Period

324.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. Menlo Grill**

Mailing Address 100 El Camino Real

City  
Menlo Park

State  
CA

Zip Code  
94025

Purpose of Disbursement  
PAC 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  
05 / 19 / 2018

FEC Identification Number

C

Transaction ID : **SB21B.5749.**  
Amount of Each Disbursement this Period

201.31

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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Stanford Park Hotel</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018
Mailing Address 100 El Camino Rd.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5749</b> Amount of Each Disbursement this Period [ ] 254.24
City Menlo Park	State CA	Zip Code 94025
Purpose of Disbursement PAC Lodging		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. Anedot</b>		Date of Disbursement MM / DD / YYYY 04 / 19 / 2018
Mailing Address PO Box 84314		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5663</b> Amount of Each Disbursement this Period [ ] 195.30
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement Credit Card Processing 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	

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2018
Mailing Address PO Box 84314		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5698</b> Amount of Each Disbursement this Period [ ] 39.30
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement Credit Card Processing 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	

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

[ ] 234.60

**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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018	
Mailing Address PO Box 84314		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5732</b> Amount of Each Disbursement this Period [ ] 58.80	
City Baton Rouge	State LA	Zip Code 70884	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fee		Memo Item <input type="checkbox"/>	
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>B. Black Rock Group LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2018	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5637</b> Amount of Each Disbursement this Period [ ] 2500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type [ ]
Purpose of Disbursement PAC Strategic Consulting		Memo Item <input type="checkbox"/>	
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>C. Black Rock Group LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2018	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5704</b> Amount of Each Disbursement this Period [ ] 2500.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type [ ]
Purpose of Disbursement PAC Strategic Consulting		Memo Item <input type="checkbox"/>	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	[ ] 5058.80
<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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Black Rock Group LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 66 Canal Center Plaza Ste 555		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5746</b> Amount of Each Disbursement this Period 2923.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC Strategic Consulting/Food & Beverage Expense 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) ▼	Category/Type <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Jones Day</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2018	
Mailing Address PO Box 7805 Ben Franklin Station		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5800</b> Amount of Each Disbursement this Period 912.50	
City Washington State DC Zip Code 20044	Purpose of Disbursement PAC Legal Services 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) ▼	Category/Type <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Koch &amp; Hoos, LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 23 / 2018	
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [ ] <b>Transaction ID : SB21B.5694</b> Amount of Each Disbursement this Period 1250.00	
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC Accounting/Compliance Services 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) ▼	Category/Type <input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	5085.50
<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)  
**True North PAC**

**A. Koch & Hoos, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N. Washington St.  
Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAC Accounting/Compliance Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 21 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5734**

Amount of Each Disbursement this Period: 1250.00

Memo Item

**B. MKJ, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
04 / 09 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5636**

Amount of Each Disbursement this Period: 4000.00

Memo Item

**C. MKJ, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 02 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5703**

Amount of Each Disbursement this Period: 4000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9250.00

**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)  
**True North PAC**

**A. MKJ, Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement PAC Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 11 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5744**

Amount of Each Disbursement this Period: 4000.00

Memo Item

**B. Rizzo, Laura, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1316 Alexandria Ave

City Alexandria State VA Zip Code 22308

Purpose of Disbursement Expense Reimbursement: See Memo

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 09 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5638**

Amount of Each Disbursement this Period: 1580.58

Memo Item

**C. American Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 10 / 2018

FEC Identification Number: C

Transaction ID : **SB21B.5638.**

Amount of Each Disbursement this Period: 1224.98

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5580.58

**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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. Rizzo Dukes Group LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2018	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5733</b> Amount of Each Disbursement this Period 3650.00	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting		Candidate Name	
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>B. Rizzo Dukes Group LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5745</b> Amount of Each Disbursement this Period 8840.10	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting		Candidate Name	
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>C. Saltwater Safari Company</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2018	
Mailing Address PO Box 1689		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.5776</b> Amount of Each Disbursement this Period 6048.00	
City Seward	State AK	Zip Code 99664	Category/ Type
Purpose of Disbursement PAC Event Expense: Fishing Charter		Candidate Name	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18538.10
<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)  
**True North PAC**

**A. Verizon**

Full Name (Last, First, Middle Initial)

Mailing Address 1300 I St NW  
Ste 500 E

City Washington State DC Zip Code 20005

Purpose of Disbursement Event Tickets

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 30 / 2018

FEC Identification Number: C

Transaction ID : SB21B.5739

Amount of Each Disbursement this Period: 7500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

**TOTAL** This Period (last page this line number only)..... ▶ 61061.61

**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 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)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. ALASKANS FOR DON YOUNG</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2018
Mailing Address 2504 FAIRBANKS ST		FEC Identification Number C 00012229 <b>Transaction ID : SB23.5783</b>
City ANCHORAGE	State AK	Zip Code 99503
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>YOUNG, DONALD E, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AK	District: 00	

Full Name (Last, First, Middle Initial) <b>B. CRAMER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2018
Mailing Address PO BOX 396		FEC Identification Number C 000504704 <b>Transaction ID : SB23.5777</b>
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CRAMER, KEVIN, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ND	District: 00	

Full Name (Last, First, Middle Initial) <b>C. DEB FISCHER FOR US SENATE INC</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 5555 SOUTH ST		FEC Identification Number C 000498907 <b>Transaction ID : SB23.5762</b>
City LINCOLN	State NE	Zip Code 68506
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>FISCHER, DEBRA S, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District: 00	

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JOHN BARRASSO</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2018
Mailing Address PO BOX 52008		FEC Identification Number C000436386 <b>Transaction ID : SB23.5705</b> Amount of Each Disbursement this Period 5000.00
City CASPER	State WY	Zip Code 82605
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>BARRASSO, JOHN A, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WY	District: 00	

Full Name (Last, First, Middle Initial) <b>B. HELLER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address PO BOX 371907		FEC Identification Number C000494229 <b>Transaction ID : SB23.5760</b> Amount of Each Disbursement this Period 5000.00
City LAS VEGAS	State NV	Zip Code 89137
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>HELLER, DEAN, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NV	District: 00	

Full Name (Last, First, Middle Initial) <b>C. HOUSLEY FOR SENATE COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 216 MYRTLE STREET W #2096		FEC Identification Number C000664219 <b>Transaction ID : SB23.5773</b> Amount of Each Disbursement this Period 5000.00
City STILLWATER	State MN	Zip Code 55082
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>HOUSLEY, KARIN, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MN	District: 00	

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**True North PAC**

**A. MATT ROSENDALE FOR MONTANA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 4907

M M M	/	D D D	/	Y Y Y Y Y
06		19		2018

City HELENA State MT Zip Code 59604

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00548289

Candidate Name  
**ROSENDALE, MATT, , ,**

Category/Type

**Transaction ID : SB23.5767**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MT District: 00

5000.00

Memo Item

**B. MIKE BRAUN FOR INDIANA**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 505 MAIN ST

M M M	/	D D D	/	Y Y Y Y Y
06		19		2018

City JASPER State IN Zip Code 47546

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00653147

Candidate Name  
**BRAUN, MIKE, , ,**

Category/Type

**Transaction ID : SB23.5763**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: IN District: 00

5000.00

Memo Item

**C. MORRISEY FOR SENATE INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 1005

M M M	/	D D D	/	Y Y Y Y Y
06		25		2018

City CHARLESTOWN State WV Zip Code 25414

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00651075

Candidate Name  
**MORRISEY, PATRICK, , MR.,**

Category/Type

**Transaction ID : SB23.5780**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: WV District: 00

5000.00

Memo Item

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

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

15000.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**True North PAC**

Full Name (Last, First, Middle Initial) <b>A. TED CRUZ FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address 815 A BRAZOS PMB 550		FEC Identification Number C 000492785 <b>Transaction ID : SB23.5766</b>
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CRUZ, RAFAEL EDWARD TED, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District: 00	

Full Name (Last, First, Middle Initial) <b>B. WICKER FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2018
Mailing Address PO BOX 64		FEC Identification Number C 000443218 <b>Transaction ID : SB23.5761</b>
City JACKSON	State MS	Zip Code 39205
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>WICKER, ROGER F, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MS	District: 00	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
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) ▼	<input type="checkbox"/> Memo Item
State:	District:	

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

10000.00

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

55000.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 42 OF 42
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**True North PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Jones Day</b>			Nature of Debt (Purpose): Legal Services
Mailing Address PO Box 7805 Ben Franklin Station			
City Washington	State DC	Zip Code 20044	

Outstanding Balance Beginning This Period 1037.50	Transaction ID : SD10.5630	
Amount Incurred This Period - 125.00	Payment This Period 912.50	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Koch &amp; Hoos, LLC</b>			Nature of Debt (Purpose): PAC Accounting/Compliance Services
Mailing Address 901 N. Washington St. Suite 700			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.5811	
Amount Incurred This Period 1270.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1270.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Rizzo, Laura, , ,</b>			Nature of Debt (Purpose): Expense Reimbursement: Travel
Mailing Address 1316 Alexandria Ave			
City Alexandria	State VA	Zip Code 22308	

Outstanding Balance Beginning This Period 1610.58	Transaction ID : SD10.5631	
Amount Incurred This Period - 30.00	Payment This Period 1580.58	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1270.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1270.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1270.00