

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 OORAH! POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 3743 Check if different than previously reported. (ACC) CARMEL IN 46082

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE C C00551853 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, 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. Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 12/01/2023 through 12/31/2023

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

Signature of Treasurer WUSLICH, JEFF, , , Date 01/27/2024

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

OORAH! POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 12 / 01 / 2023 To: 12 / 31 / 2023

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2023		179446.97
(b) Cash on Hand at Beginning of Reporting Period.....	28866.29	
(c) Total Receipts (from Line 19) .....	162082.90	512985.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	190949.19	692432.01
7. Total Disbursements (from Line 31).....	19732.39	521215.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	171216.80	171216.80
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16500.00	64650.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	16500.00	64650.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	119800.00	400300.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	136300.00	464950.00
12. Transfers From Affiliated/Other Party Committees.....	25782.90	48035.04
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)).....▶	162082.90	512985.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	162082.90	512985.04

**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 .....	22232.39	364365.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	22232.39	364365.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	125000.00
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).....	- 2500.00	31850.00
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)) ..	19732.39	521215.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19732.39	521215.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	136300.00	464950.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	136300.00	464950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	22232.39	364365.21
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	22232.39	364365.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. FAISON, JAY, W., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1355 GREENWOOD CLIFF SUITE 301  
 City CHARLOTTE State NC Zip Code 28204-2981  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CLEARPATH Occupation (for Individual) CEO  
 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  
 12 / 31 / 2023  
**Transaction ID : SA11A.166963**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
**CONTRIBUTION**

**B. KIME, CARL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2231 NORTH QUEBEC STREET  
 City ARLINGTON State VA Zip Code 22207-3815  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INNOVATIVE FEDERAL STRATEGIES Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2023  
**Transaction ID : SA11A.166842**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**C. LUCAS, JANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 F STREET NORTHWEST  
 City WASHINGTON State DC Zip Code 20004-1438  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALSTON BIRD Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2023  
**Transaction ID : SA11A.166744**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

<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 7 OF 33
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

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

Mailing Address **3037 NORTH QUINCY STREET**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22207-4139</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>DATA &amp; MARKETING ASSOCIATION</b>	Occupation (for Individual) <b>GOVERNMENT AFFAIRS</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
**12 / 22 / 2023**

**Transaction ID : SA11A.166783**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. STANARD, JAMES, N., MR.,**

Mailing Address **570 SOUTH SPOONBILL DRIVE**

City <b>SARASOTA</b>	State <b>FL</b>	Zip Code <b>34236-1820</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RETIRED</b>	Occupation (for Individual) <b>RETIRED</b>
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

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

Date of Receipt  
**12 / 14 / 2023**

**Transaction ID : SA11A.165693**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

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

Mailing Address **3206 22ND STREET NORTH**

City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22201-4337</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>CAPITOL TAX PARTNERS</b>	Occupation (for Individual) <b>ATTORNEY</b>
--	--

Receipt For:  
 Primary  General  
 Other (specify)

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

Date of Receipt  
**12 / 21 / 2023**

**Transaction ID : SA11A.166751**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>10500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>16500.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ABBOTT LABORATORIES EMPLOYEE PAC**

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

Mailing Address 100 ABBOTT PARK ROAD  
# D312

City ABBOTT PARK State IL Zip Code 60064-3502

FEC ID number of contributing federal political committee. **C** C00040279

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 29 / 2023  
**Transaction ID : SA11C.166914**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. AIR LINE PILOTS ASSOCIATION INT'L PAC**

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

Mailing Address 1625 MASSACHUSETTS AVENUE NW

City WASHINGTON State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C** C00035451

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 29 / 2023  
**Transaction ID : SA11C.166915**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. AM GENERAL LLC PAC**

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

Mailing Address 1401 SOUTH CLARK STREET STE 1030

City ARLINGTON State VA Zip Code 22202-4165

FEC ID number of contributing federal political committee. **C** C00432856

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 07 / 2023  
**Transaction ID : SA11C.167544**

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 9 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN DENTAL ASSOCIATION PAC**

Mailing Address 1111 14TH STREET NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C** C00000729

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  
12 / 29 / 2023

**Transaction ID : SA11C.166917**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 TENTH STREET, NW  
TWO CITYCENTER, SUITE 400

City WASHINGTON State DC Zip Code 20001-5189

FEC ID number of contributing federal political committee. **C** C00106146

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  
12 / 22 / 2023

**Transaction ID : SA11C.166777**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC - AIC**

Mailing Address 220 LEIGH FARM ROAD  
PALLADIAN 1

City DURHAM State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

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  
12 / 22 / 2023

**Transaction ID : SA11C.166779**

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: PAGE 10 OF 33  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN PODIATRIC MEDICAL ASSOCIATION PAC**

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
12 / 10 / 2023  
**Transaction ID : SA11C.165672**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AMERICAS HEALTH INSURANCE PLANS PAC**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 500

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00106740

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 29 / 2023  
**Transaction ID : SA11C.166911**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. ASSOCIATED GENERAL CONTRACTORS OF AMERICA PAC - AGC PAC**

Mailing Address 2300 WILSON BOULEVARD  
SUITE 400

City ARLINGTON State VA Zip Code 22201-5424

FEC ID number of contributing federal political committee. **C** C00082917

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
12 / 31 / 2023  
**Transaction ID : SA11C.166955**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 10000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ASSOCIATION OF AMERICAN RAILROADS PAC**

Mailing Address 425 3RD STREET, S.W.  
SUITE 1000

City WASHINGTON State DC Zip Code 20024-3228

FEC ID number of contributing federal political committee. **C** C00280743

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2023

Transaction ID : SA11C.166781

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AT&T INC. FEDERAL PAC**

Mailing Address 208 S. AKARD STREET  
FRONT 2701

City DALLAS State TX Zip Code 75202-4206

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2023

Transaction ID : SA11C.166957

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BNSF RAILWAY COMPANY RAILPAC**

Mailing Address PO BOX 961039

City FORT WORTH State TX Zip Code 76161-0039

FEC ID number of contributing federal political committee. **C** C00235739

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  
12 / 19 / 2023

Transaction ID : SA11C.166732

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 12 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. CENTENE CORPORATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7700 FORSYTH BLVD.  
City SAINT LOUIS State MO Zip Code 63105-1810  
FEC ID number of contributing federal political committee. **C** C00397851  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 12 / 10 / 2023  
**Transaction ID : SA11C.165673**  
Amount of Each Receipt this Period: 1500.00  
 Memo Item  
CONTRIBUTION

**B. CHARTER COMMUNICATIONS, INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 400 ATLANTIC STREET 10TH FLOOR  
City STAMFORD State CT Zip Code 06901-3512  
FEC ID number of contributing federal political committee. **C** C00426775  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 31 / 2023  
**Transaction ID : SA11C.166961**  
Amount of Each Receipt this Period: 2500.00  
 Memo Item  
CONTRIBUTION

**C. CITIGROUP INC. PAC - FEDERAL**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1101 PENNSYLVANIA AVENUE NW SUITE 1000  
City WASHINGTON State DC Zip Code 20004-2524  
FEC ID number of contributing federal political committee. **C** C00008474  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 12 / 31 / 2023  
**Transaction ID : SA11C.166924**  
Amount of Each Receipt this Period: 2500.00  
 Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<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 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. CONSERVATIVES ORGANIZED TO ADVANCE TOMORROW'S SOLUTIONS PAC**

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

Mailing Address 1425 K STREET NW  
SUITE 650

City WASHINGTON State DC Zip Code 20005-3658

FEC ID number of contributing federal political committee. **C** C00494559

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2023

**Transaction ID : SA11C.166910**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. CROWE PAC**

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

Mailing Address 3815 RIVER CROSSING PARKWAY  
SUITE 300

City INDIANAPOLIS State IN Zip Code 46240-7767

FEC ID number of contributing federal political committee. **C** C00451518

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2023

**Transaction ID : SA11C.166733**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. CROWE PAC**

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

Mailing Address 3815 RIVER CROSSING PARKWAY  
SUITE 300

City INDIANAPOLIS State IN Zip Code 46240-7767

FEC ID number of contributing federal political committee. **C** C00451518

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2023

**Transaction ID : SA11C.166926**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION**

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

Mailing Address 601 PENNSYLVANIA AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20004-2727

FEC ID number of contributing federal political committee. **C** C00007880

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2023

**Transaction ID : SA11C.166958**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. CVS HEALTH PAC**

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

Mailing Address 1275 PENNSYLVANIA AVENUE, NW  
SUITE 700

City WASHINGTON State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee. **C** C00384818

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  
12 / 31 / 2023

**Transaction ID : SA11C.166927**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. DELOITTE FEDERAL PAC**

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

Mailing Address PO BOX 365

City WASHINGTON State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

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  
12 / 22 / 2023

**Transaction ID : SA11C.166784**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<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 15 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

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

Mailing Address 1455 PENNSYLVANIA AVENUE NW  
SUITE 820

City WASHINGTON State DC Zip Code 20004-1029

FEC ID number of contributing federal political committee. **C** C00695304

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3300.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 08 / 2023

**Transaction ID : SA11C.165687**

Amount of Each Receipt this Period  
3300.00

Memo Item  
CONTRIBUTION

**B. FLORIDA HEALTH POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4800 DEERWOOD CAMPUS PARKWAY

City JACKSONVILLE State FL Zip Code 32246-6498

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 ▼  
1500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2023

**Transaction ID : SA11C.166735**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. GENERAL MOTORS COMPANY PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVENUE NW  
SUITE 400 SUITE 400

City WASHINGTON State DC Zip Code 20001-1427

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 19 / 2023

**Transaction ID : SA11C.166730**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7300.00
<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: PAGE 16 OF 33  
 (check only one)

<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

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

Mailing Address 25 MASSACHUSETTS AVE NW  
9TH FLOOR

City WASHINGTON State DC Zip Code 20001-1430

FEC ID number of contributing federal political committee. **C** C00428623

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  
 12 / 31 / 2023

**Transaction ID : SA11C.166960**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. HIGHMARK PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER STREET

City CAMP HILL State PA Zip Code 17011-1702

FEC ID number of contributing federal political committee. **C** C00302844

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  
 12 / 10 / 2023

**Transaction ID : SA11C.165674**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. HONEYWELL INTERNATIONAL PAC**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 500 SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

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  
 12 / 31 / 2023

**Transaction ID : SA11C.166956**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4500.00

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



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

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

FOR LINE NUMBER: PAGE 17 OF 33  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. INDEPENDENT ELECTRICAL CONTRACTORS INC PAC (IEC PRIDE PAC)**

Mailing Address 2900 SOUTH QUINCY STREET  
 SUITE 720

City ARLINGTON State VA Zip Code 22206-2281

FEC ID number of contributing federal political committee. **C** C00332031

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  
 12 / 31 / 2023

**Transaction ID : SA11C.167062**

Amount of Each Receipt this Period  
 1500.00

Memo Item  
 CONTRIBUTION

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

Mailing Address 1350 I STREET NW SUITE 1210

City WASHINGTON State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C** C00010983

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

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  
 12 / 31 / 2023

**Transaction ID : SA11C.166959**

Amount of Each Receipt this Period  
 2000.00

Memo Item  
 CONTRIBUTION

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

Mailing Address P.O. BOX 18254

City WASHINGTON State DC Zip Code 20036-8254

FEC ID number of contributing federal political committee. **C** C00280222

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  
 12 / 31 / 2023

**Transaction ID : SA11C.167061**

Amount of Each Receipt this Period  
 2500.00

Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6000.00

**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 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. LEIDOS INC. PAC**

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

Mailing Address 301 LABORATORY ROAD

City OAK RIDGE	State TN	Zip Code 37830-6912
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00546234

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  
 12 / 31 / 2023

**Transaction ID : SA11C.166928**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. MORTGAGE BANKERS ASSOCIATION PAC**

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

Mailing Address 1919 M STREET, NW  
5TH FLOOR

City WASHINGTON	State DC	Zip Code 20036-3572
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004812

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  
 12 / 21 / 2023

**Transaction ID : SA11C.166822**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL APARTMENT ASSOCIATION PAC**

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

Mailing Address 4300 WILSON BOULEVARD  
SUITE 400

City ARLINGTON	State VA	Zip Code 22203-4167
-------------------	-------------	------------------------

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 ▼  
6500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2023

**Transaction ID : SA11C.166912**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

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

**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 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC - NACS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1600 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3466
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00126763

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
12	/	31	/	2023

**Transaction ID : SA11C.166925**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. NATIONAL APARTMENT ASSOCIATION PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4300 WILSON BOULEVARD  
SUITE 400

City ARLINGTON	State VA	Zip Code 22203-4167
-------------------	-------------	------------------------

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 ▼  
6500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2023

**Transaction ID : SA11C.167400**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION PAC NECAPAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3 BETHESDA METRO CENTER  
SUITE 1100

City BETHESDA	State MD	Zip Code 20814-6302
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00113811

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
12	/	31	/	2023

**Transaction ID : SA11C.166962**

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 20 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. NATIONAL ROOFING CONTRACTORS ASSOCIATION PAC**

Mailing Address 10255 W. HIGGINS RD #600

City ROSEMONT	State IL	Zip Code 60018-5613
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00244863

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  
12 / 29 / 2023

**Transaction ID : SA11C.166913**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address ONE CONSTITUTION AVE NE

City WASHINGTON	State DC	Zip Code 20002-5618
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009282

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  
12 / 22 / 2023

**Transaction ID : SA11C.166778**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. SMALL BUSINESS INVESTOR ALLIANCE PAC**

Mailing Address PO BOX 14358

City WASHINGTON	State DC	Zip Code 20044-4358
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00109991

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  
12 / 22 / 2023

**Transaction ID : SA11C.166782**

Amount of Each Receipt this Period  
1500.00

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 21 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. TRINET GROUP INC PAC**

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

Mailing Address **ONE PARK PL  
SUITE 600**

City **DUBLIN** State **CA** Zip Code **94568-7983**

FEC ID number of contributing federal political committee. **C C00495556**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt **12 / 31 / 2023**

**Transaction ID : SA11C.166964**

Amount of Each Receipt this Period **2500.00**

Memo Item  
CONTRIBUTION

**B. UNION PACIFIC CORPORATION 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 **20005-6621**

FEC ID number of contributing federal political committee. **C C00010470**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **12 / 19 / 2023**

**Transaction ID : SA11C.166734**

Amount of Each Receipt this Period **5000.00**

Memo Item  
CONTRIBUTION

**C. VISA, INC. PAC**

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

Mailing Address **325 7TH STREET, NW  
SUITE 800**

City **WASHINGTON** State **DC** Zip Code **20004-2801**

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 ▼ **4000.00**

Date of Receipt **12 / 22 / 2023**

**Transaction ID : SA11C.166780**

Amount of Each Receipt this Period **1500.00**

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>9000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 33
<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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. WHOLESALE-DISTRIBUTOR PAC OF THE NATIONAL ASSOCIATION OF WH**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1325 G STREET NW  
 SUITE 1000  
 City WASHINGTON State DC Zip Code 20005-3134  
 FEC ID number of contributing federal political committee. **C** C00109306  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 19 / 2023  
**Transaction ID : SA11C.166731**  
 Amount of Each Receipt this Period  
 1000.00  
 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).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	119800.00

# 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 23 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YOUNG VICTORY COMMITTEE II**

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

Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082-3743
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00696484

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
48035.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023

**Transaction ID : SA12.167070**

Amount of Each Receipt this Period  
25782.90

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. CHEN, STANLEY, , MR.,**

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

Mailing Address 620 1ST AVENUE NORTHWEST

City CARMEL	State IN	Zip Code 46032-1330
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)  
TELAMON CORP CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1733.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2023

**Transaction ID : SA.166863.15.2304**

Amount of Each Receipt this Period  
1733.00

Memo Item  
TRANSFER  
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

**C. CORNELIUS, JAMES, M., MR.,**

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

Mailing Address 7012 HUNT CLUB DRIVE

City ZIONSVILLE	State IN	Zip Code 46077-9300
--------------------	-------------	------------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2023

**Transaction ID : SA.166929.15.2304**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

<b>SUBTOTAL</b> of Receipts This Page (optional).....	25782.90
<b>TOTAL</b> This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 24 OF 33
Use separate schedule(s) for each category of the Detailed Summary Page
11a 11b 11c 12 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
OORAH! POLITICAL ACTION COMMITTEE

A. CORNELIUS, KATHLEEN, M., MRS.,
Mailing Address 7012 HUNT CLUB DRIVE
City ZIONSVILLE State IN Zip Code 46077-9300
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ARTIST
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 12 / 31 / 2023
Transaction ID : SA.166930.15.2304
Amount of Each Receipt this Period 5000.00
Memo Item TRANSFER
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

B. PFAUTCH, ROY, , MR.,
Mailing Address 52 PORTLAND PLACE
City SAINT LOUIS State MO Zip Code 63108-1242
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) CIVIL SERVICE INC. Occupation (for Individual) CONSULTANT
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 12 / 31 / 2023
Transaction ID : SA.166971.15.2304
Amount of Each Receipt this Period 5000.00
Memo Item TRANSFER
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

C. RECTOR, CURTIS, A., ,
Mailing Address 11911 PROMONTORY COURT
City INDIANAPOLIS State IN Zip Code 46236-8985
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) ARBOR HOMES Occupation (for Individual) HOMEBUILDER
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 5000.00

Date of Receipt 12 / 10 / 2023
Transaction ID : SA.165669.15.2304
Amount of Each Receipt this Period 5000.00
Memo Item TRANSFER
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

SUBTOTAL of Receipts This Page (optional) 0.00
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 25 OF 33
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ROOPE, CALEB, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 550 W. STATE STREET  
 City EAGLE State ID Zip Code 83616-4906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THE PACIFIC COMPANIES Occupation (for Individual) RE DEVELOPER  
 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  
 12 / 31 / 2023  
**Transaction ID : SA.166873.15.2304**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM YOUNG VICTORY COMMITTEE 2

**B. HCA HEALTHCARE, INC. GOOD GOVERNMENT FUND**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 550 ONE PARK PLAZA  
 City NASHVILLE State TN Zip Code 37202-0550  
 FEC ID number of contributing federal political committee. **C** C00067231  
 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  
 11 / 24 / 2023  
**Transaction ID : SA.165472.15.2304**  
 Amount of Each Receipt this Period  
 1500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM YOUNG VICTORY COMMITTEE 2

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	25782.90

# 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)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOANNA KING FOR THE PEOPLE**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

Mailing Address PO BOX 11

City MIDDLEBURY	State IN	Zip Code 46540
--------------------	-------------	-------------------

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2443**  
Amount of Each Disbursement this Period

[REDACTED] 1000.00

Memo Item

Purpose of Disbursement  
SPONSORSHIP

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) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**B. CONNELL, JOHN, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			26			2023			

Mailing Address P.O. BOX 3743

City CARMEL	State IN	Zip Code 46082
----------------	-------------	-------------------

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2443**  
Amount of Each Disbursement this Period

[REDACTED] 2466.00

Memo Item

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

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) ▼
State: District:	

Full Name (Last, First, Middle Initial)

**C. O'BRIEN, LAUREN, , ,**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

Mailing Address P.O. BOX 3743

City CARMEL	State IN	Zip Code 46082
----------------	-------------	-------------------

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I2442**  
Amount of Each Disbursement this Period

[REDACTED] 298.95

Memo Item

Purpose of Disbursement  
EXPENSE REIMBURSEMENT - SEE MEMOS

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) ▼
State: District:	

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

[REDACTED] 3764.95

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DRIVE

City  
DALLAS

State  
TX

Zip Code  
75235-1908

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2443'

Amount of Each Disbursement this Period

[REDACTED] 248.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I24402

Amount of Each Disbursement this Period

[REDACTED] 382.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2440

Amount of Each Disbursement this Period

[REDACTED] 393.90

Memo Item

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

[REDACTED] 776.80

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

[REDACTED]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I24413

Amount of Each Disbursement this Period

[REDACTED] - 382.90

Memo Item

Full Name (Last, First, Middle Initial)

### B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD

City  
FORT WORTH

State  
TX

Zip Code  
76155-2605

Purpose of Disbursement

TRAVEL

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I24413

Amount of Each Disbursement this Period

[REDACTED] - 393.90

Memo Item

Full Name (Last, First, Middle Initial)

### C. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City  
DALLAS

State  
TX

Zip Code  
75204

Purpose of Disbursement

CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:

 House  
 Senate  
 President

Disbursement For:

 Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			18			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2442

Amount of Each Disbursement this Period

[REDACTED] 200.30

Memo Item

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

[REDACTED] - 576.50

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

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

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

State: District:

Date of Disbursement: 12 / 27 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2443!

Amount of Each Disbursement this Period: 200.30

Memo Item

**B. BROGHAMER CONSULTING LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 502 MONROE ST

City NEWPORT State KY Zip Code 41071-2006

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 12 / 21 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2442f

Amount of Each Disbursement this Period: 3008.10

Memo Item

**C. GOOGLE**

Full Name (Last, First, Middle Initial)

Mailing Address 1600 AMPHITHEATRE PARKWAY

City MOUNTAIN VIEW State CA Zip Code 94043-1351

Purpose of Disbursement  
SOFTWARE

Candidate Name

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

State: District:

Date of Disbursement: 12 / 04 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2440

Amount of Each Disbursement this Period: 30.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3238.40

**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)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. LIMESTONE STRATEGIES**

Mailing Address 5750 CASTLE CREEK PKWY N DR, SUIT  
SUITE 367

City  
INDIANAPOLIS

State  
IN

Zip Code  
46250

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2442!**

Amount of Each Disbursement this Period

[Redacted] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LYFT**

Mailing Address 185 BERRY ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2439!**

Amount of Each Disbursement this Period

[Redacted] 21.14

Memo Item

Full Name (Last, First, Middle Initial)

**C. LYFT**

Mailing Address 185 BERRY ST

City  
SAN FRANCISCO

State  
CA

Zip Code  
94107

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			04			2023			

FEC Identification Number

**C** [Redacted]

**Transaction ID : SB21B.I2440**

Amount of Each Disbursement this Period

[Redacted] 17.08

Memo Item

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

[Redacted] 5038.22

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

[Redacted]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. LYFT</b>		Date of Disbursement MM / DD / YYYY 12 / 14 / 2023	
Mailing Address 185 BERRY ST			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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) ▼		
State: District:	<input type="checkbox"/> Memo Item		
FEC Identification Number C		Transaction ID : SB21B.I24411	
Amount of Each Disbursement this Period 18.99			

Full Name (Last, First, Middle Initial) <b>B. LYFT</b>		Date of Disbursement MM / DD / YYYY 12 / 18 / 2023	
Mailing Address 185 BERRY ST			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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) ▼		
State: District:	<input type="checkbox"/> Memo Item		
FEC Identification Number C		Transaction ID : SB21B.I24421	
Amount of Each Disbursement this Period 39.89			

Full Name (Last, First, Middle Initial) <b>C. LYFT</b>		Date of Disbursement MM / DD / YYYY 12 / 22 / 2023	
Mailing Address 185 BERRY ST			
City SAN FRANCISCO	State CA	Zip Code 94107	
Purpose of Disbursement TRAVEL		<input type="text"/>	
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) ▼		
State: District:	<input type="checkbox"/> Memo Item		
FEC Identification Number C		Transaction ID : SB21B.I2442	
Amount of Each Disbursement this Period 11.60			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	70.48
<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)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. SOCKO STRATEGIES, LLC**

Mailing Address 1101 30TH ST NW STE 125

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2442i

Amount of Each Disbursement this Period

9	5	7	7	.	8	0
---	---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. SOCKO STRATEGIES, LLC**

Mailing Address 1101 30TH ST NW STE 125

City  
WASHINGTON

State  
DC

Zip Code  
20007

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			21			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2442i

Amount of Each Disbursement this Period

3	9	5	0	.	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MONOCLE**

Mailing Address 107 D ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002-5657

Purpose of Disbursement  
FOOD/BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			14			2023			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I2441

Amount of Each Disbursement this Period

2	1	2	7	.	8	0
---	---	---	---	---	---	---

Memo Item

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

9	5	7	7	.	8	0
---	---	---	---	---	---	---

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

2	1	8	9	.	0	1	5
---	---	---	---	---	---	---	---



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT DESMONT UPCHURCH**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			19			2023					

Mailing Address 2043 SOUTH BEND AVE #202

City  
SOUTH BEND

State  
IN

Zip Code  
46637

FEC Identification Number

C [ ]

**Transaction ID : SB29.I24417**

Amount of Each Disbursement this Period

[ ] - 2500.00

Purpose of Disbursement

VOID: POLITICAL CONTRIBUTION

[ ]

Category/  
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2023

<input type="checkbox"/>	Primary	<input checked="" type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Purpose of Disbursement

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)		

State:

District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

City

State

Zip Code

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Purpose of Disbursement

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) ▼		

State:

District:

Memo Item

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

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

[ ] - 2500.00

[ ] - 2500.00