

# 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**  
**CARLY FOR AMERICA**

ADDRESS (number and street) **PO BOX 25647**  
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22313**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00610568** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2018 through  /  /  2018

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

Signature of Treasurer Hankins, Brenda, , , [Electronically Filed] Date  /  /  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

**CARLY FOR AMERICA**

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"/>		127186.88
(b) Cash on Hand at Beginning of Reporting Period.....	45800.41	
(c) Total Receipts (from Line 19) .....	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45800.41	127186.88
7. Total Disbursements (from Line 31).....	11516.32	92902.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	34284.09	34284.09
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**CARLY FOR AMERICA**

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
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)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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 .....	9001.32	87882.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9001.32	87882.79
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	5000.00
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).....	15.00	20.00
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)) ..	11516.32	92902.79
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11516.32	92902.79

**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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9001.32	87882.79
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9001.32	87882.79



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4319.4</b> Amount of Each Disbursement this Period 154.05
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4319.5</b> Amount of Each Disbursement this Period 167.73
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4319.</b> Amount of Each Disbursement this Period 174.57
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item

**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)  
**CARLY FOR AMERICA**

**A. Rendez-Vous Limousine LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1425 K St  
Ste 350

City Washington State DC Zip Code 20005

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4319.8

Amount of Each Disbursement this Period: 154.05

Memo Item

**B. Rendez-Vous Limousine LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1425 K St  
Ste 350

City Washington State DC Zip Code 20005

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 29 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4319.8

Amount of Each Disbursement this Period: 167.73

Memo Item

**C. Rendez-Vous Limousine LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1425 K St  
Ste 350

City Washington State DC Zip Code 20005

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
06 / 20 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4319.8

Amount of Each Disbursement this Period: 154.05

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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4319.</b> Amount of Each Disbursement this Period 160.89
City Washington	State DC	
Zip Code 20005		Category/ Type
Purpose of Disbursement Travel		
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. Hertz</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2018
Mailing Address 8501 Williams Rd		FEC Identification Number C <b>Transaction ID : SB21B.4319.1</b> Amount of Each Disbursement this Period 79.16
City Estero	State FL	
Zip Code 33928		Category/ Type
Purpose of Disbursement Travel		
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>C. American Express</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2018
Mailing Address World Financial Center 200 Vesey St		FEC Identification Number C <b>Transaction ID : SB21B.4331</b> Amount of Each Disbursement this Period 2029.30
City New York	State NY	
Zip Code 10285		Category/ Type
Purpose of Disbursement Credit Card Payment (See Below)		
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:		

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

2029.30

**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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Travel Refund

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4331.1**  
Amount of Each Disbursement this Period  
[ ] - 516.98

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Travel Refund

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4331.1**  
Amount of Each Disbursement this Period  
[ ] - 516.98

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Travel Refund

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.4331.1**  
Amount of Each Disbursement this Period  
[ ] - 516.98

Memo Item

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

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

[ ]	0.00
[ ]	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.4331.  
Amount of Each Disbursement this Period  
1033.96

Memo Item

Full Name (Last, First, Middle Initial)

**B. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.4331.  
Amount of Each Disbursement this Period  
1033.96

Memo Item

Full Name (Last, First, Middle Initial)

**C. Southwest Airlines**

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 28 / 2018

FEC Identification Number

C  
Transaction ID : SB21B.4331.  
Amount of Each Disbursement this Period  
1033.96

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)  
**CARLY FOR AMERICA**

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

Date of Disbursement  
MM / DD / YYYY  
07 / 18 / 2018

Mailing Address 19300 International Blvd

City Seattle State WA Zip Code 98188

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
C  
Transaction ID : SB21B.4331.f  
Amount of Each Disbursement this Period  
482.20

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
07 / 18 / 2018

Mailing Address 19300 International Blvd

City Seattle State WA Zip Code 98188

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
C  
Transaction ID : SB21B.4331.7  
Amount of Each Disbursement this Period  
49.00

Memo Item

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

Date of Disbursement  
MM / DD / YYYY  
07 / 18 / 2018

Mailing Address 19300 International Blvd

City Seattle State WA Zip Code 98188

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

FEC Identification Number  
C  
Transaction ID : SB21B.4331.  
Amount of Each Disbursement this Period  
49.00

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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Alaska Airlines**

Mailing Address 19300 International Blvd

City  
Seattle

State  
WA

Zip Code  
98188

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

**Transaction ID : SB21B.4331.1**

Amount of Each Disbursement this Period

49.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Alaska Airlines**

Mailing Address 19300 International Blvd

City  
Seattle

State  
WA

Zip Code  
98188

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

**Transaction ID : SB21B.4331.1**

Amount of Each Disbursement this Period

482.20

Memo Item

Full Name (Last, First, Middle Initial)

**C. Alaska Airlines**

Mailing Address 19300 International Blvd

City  
Seattle

State  
WA

Zip Code  
98188

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

**Transaction ID : SB21B.4331.1**

Amount of Each Disbursement this Period

482.20

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)  
**CARLY FOR AMERICA**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4331.

Amount of Each Disbursement this Period: 36.38

Memo Item

**B. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4331.1

Amount of Each Disbursement this Period: 8.00

Memo Item

**C. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 18 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4331.

Amount of Each Disbursement this Period: 24.54

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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4331.</b> Amount of Each Disbursement this Period 154.05
City Washington	State DC	
Purpose of Disbursement Travel	Zip Code 20005	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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2018
Mailing Address 2702 Love Field Dr		FEC Identification Number C <b>Transaction ID : SB21B.4331.</b> Amount of Each Disbursement this Period - 785.96
City Dallas	State TX	
Purpose of Disbursement Travel Refund	Zip Code 75235	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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2018
Mailing Address 2702 Love Field Dr		FEC Identification Number C <b>Transaction ID : SB21B.4331.</b> Amount of Each Disbursement this Period - 785.96
City Dallas	State TX	
Purpose of Disbursement Travel Refund	Zip Code 75235	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) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

0.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

### A. American Express

Date of Disbursement

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

Mailing Address World Financial Center  
200 Vesey St

City New York State NY Zip Code 10285

Purpose of Disbursement  
Credit Card Payment (See Below)

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4332

Amount of Each Disbursement this Period

[REDACTED] 2802.86

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### B. Southwest Airlines

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2018

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4332.C

Amount of Each Disbursement this Period

[REDACTED] 785.96

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

### C. Southwest Airlines

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		23		2018

Mailing Address 2702 Love Field Dr

City Dallas State TX Zip Code 75235

Purpose of Disbursement  
Travel

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4332.

Amount of Each Disbursement this Period

[REDACTED] 785.96

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

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

[REDACTED] 2802.86

[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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial) <b>A. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 07 / 24 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4332.1</b> Amount of Each Disbursement this Period 160.89
City Washington	State DC	
Purpose of Disbursement Travel	Zip Code 20005	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 07 / 25 / 2018
Mailing Address 1455 Market St FI 4		FEC Identification Number C <b>Transaction ID : SB21B.4332.3</b> Amount of Each Disbursement this Period 5.00
City San Francisco	State CA	
Purpose of Disbursement Travel	Zip Code 94103	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. Rendez-Vous Limousine LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 07 / 2018
Mailing Address 1425 K St Ste 350		FEC Identification Number C <b>Transaction ID : SB21B.4332.</b> Amount of Each Disbursement this Period 159.52
City Washington	State DC	
Purpose of Disbursement Travel	Zip Code 20005	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

**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)  
**CARLY FOR AMERICA**

**A. Uber**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 Market St  
FI 4

City San Francisco State CA Zip Code 94103

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4332.1

Amount of Each Disbursement this Period: 35.79

Memo Item

**B. Radisson**

Full Name (Last, First, Middle Initial)

Mailing Address 11340 Blondo St

City Omaha State NE Zip Code 68164

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4332.1

Amount of Each Disbursement this Period: 306.01

Memo Item

**C. Radisson**

Full Name (Last, First, Middle Initial)

Mailing Address 11340 Blondo St

City Omaha State NE Zip Code 68164

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2018

FEC Identification Number: C

Transaction ID : SB21B.4332.1

Amount of Each Disbursement this Period: 306.01

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)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Election CFO LLC**

Mailing Address PO Box 26141

City  
Alexandria

State  
VA

Zip Code  
22313

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4322**

Amount of Each Disbursement this Period

[ ] 630.95 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**B. Google**

Mailing Address 1600 Amphitheater Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Online Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4318**

Amount of Each Disbursement this Period

[ ] 50.00 [ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C. Google**

Mailing Address 1600 Amphitheater Pkwy

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Online Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : SB21B.4321**

Amount of Each Disbursement this Period

[ ] 50.00 [ ]

Memo Item

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

[ ] 730.95 [ ]

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

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**CARLY FOR AMERICA**

Full Name (Last, First, Middle Initial)

**A. Google**

Mailing Address 1600 Amphitheater Pkwy

City Mountain View State CA Zip Code 94043

Purpose of Disbursement  
Online Services

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4333**  
Amount of Each Disbursement this Period  
50.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Tusk Digital**

Mailing Address 718 7th St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Digital Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4320**  
Amount of Each Disbursement this Period  
583.62

Memo Item

Full Name (Last, First, Middle Initial)

**C. Tusk Digital**

Mailing Address 718 7th St NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Digital Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2018

FEC Identification Number

C  
**Transaction ID : SB21B.4330**  
Amount of Each Disbursement this Period  
297.00

Memo Item

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

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

930.62  
9001.32

# 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)  
**CARLY FOR AMERICA**

**A. CURTIS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 370 EAST SOUTH TEMPLE, SUITE 580

City SALT LAKE CITY State UT Zip Code 84111

Purpose of Disbursement  
COntribution

Candidate Name

Office Sought:  House  Senate  President  
State: UT District: 03

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement: 08 / 16 / 2018

FEC Identification Number: C00647339  
Transaction ID : SB23.4402

Amount of Each Disbursement this Period: 2500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2500.00