

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

TEA PARTY MAJORITY FUND

ADDRESS (number and street)

2776 S ARLINGTON MILL DR #806

Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00566174

3. IS THIS REPORT

X

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), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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 11 / 06 / 2018 in the State of

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on 11 / 06 / 2018 in the State of

5. Covering Period

10 / 18 / 2018 through 11 / 26 / 2018

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

MACKENZIE, SCOTT B, ,

Type or Print Name of Treasurer

Signature of Treasurer

MACKENZIE, SCOTT B, ,

[Electronically Filed]

Date

12 / 04 / 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.

Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TEA PARTY MAJORITY FUND

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"/>		81137.78
(b) Cash on Hand at Beginning of Reporting Period.....	68685.54	
(c) Total Receipts (from Line 19)	66286.00	581926.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	134971.54	663064.06
7. Total Disbursements (from Line 31).....	77452.83	605545.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	57518.71	57518.71
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	32612.93	

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

TEA PARTY MAJORITY FUND

Report Covering the Period: From: M M / D D / Y Y Y Y
10 / 18 / 2018 To: M M / D D / Y Y Y Y
11 / 26 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	21101.00	110644.00
(ii) Unitemized	45185.00	471282.28
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	66286.00	581926.28
(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)	66286.00	581926.28
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)).....▶	66286.00	581926.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	66286.00	581926.28

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	8817.66	163179.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8817.66	163179.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	35000.00
24. Independent Expenditures (use Schedule E)	38635.17	342387.07
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	1350.00
(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	1350.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	63628.68
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)) ..	77452.83	605545.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	77452.83	605545.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	66286.00	581926.28
34. Total Contribution Refunds (from Line 28(d))	0.00	1350.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	66286.00	580576.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	8817.66	163179.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8817.66	163179.60

**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 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
TEA PARTY MAJORITY FUND

A. AHEARN 103, MARY E, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 179 BENTON AVE
 City STATEN ISLAND State NY Zip Code 10305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.23566
 Amount of Each Receipt this Period 205.00
 Memo Item

B. ALDINGER 760, ROGER, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 608 OVERLAND TRL
 City SOUTHLAKE State TX Zip Code 76092
 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 ▼ 300.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.23572
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ALDRICH 822, DICK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 534 REDBIRD RD
 City LUSK State WY Zip Code 82225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 22 / 2018
Transaction ID : SA11AI.23573
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. ALEXANDER 431, CARL A, , MR,
Mailing Address 5160 DURRETT RD

City ORIENT	State OH	Zip Code 43146
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) OHIO STATE UNIVERSITY		Occupation (for Individual) EDUCATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 405.00

Date of Receipt
11 / 09 / 2018
Transaction ID : **SA11AI.23575**

Amount of Each Receipt this Period
105.00

Memo Item

B. ALFANO 105, ANNA, , MRS,
Mailing Address 73 MOSEMAN AVE

City KATONAH	State NY	Zip Code 10536
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SIEMENS HEALTHCARE		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
10 / 26 / 2018
Transaction ID : **SA11AI.23576**

Amount of Each Receipt this Period
150.00

Memo Item

C. ANDERSON 836, BOYD W, , MR,
Mailing Address 17220 S CLOVERDALE RD

City KUNA	State ID	Zip Code 83634
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 19 / 2018
Transaction ID : **SA11AI.23588**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 69
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ANDERSON 928, RANDY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 335 DEVONSHIRE DR

City BREA	State CA	Zip Code 92821
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11AI.23590

Amount of Each Receipt this Period
200.00

Memo Item

B. BARKER 707, PAUL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1908 CYPRESS WOOD DR

City BAKER	State LA	Zip Code 70714
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIRUS TECHNICAL SERVICES	Occupation (for Individual) NUCLEAR TECHNOLOGIST
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.23642

Amount of Each Receipt this Period
350.00

Memo Item

C. BEAL 662, TOM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5001 W 86TH ST

City PRAIRIE VILLAGE	State KS	Zip Code 66207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11AI.23660

Amount of Each Receipt this Period
100.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. BEHAN 761, DALE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 159 WAGGONER CT

City FORT WORTH	State TX	Zip Code 76108
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WESTERN COMPANY OF TEXAS INC	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2018

Transaction ID : SA11AI.23668

Amount of Each Receipt this Period
250.00

Memo Item

B. BENCA 306, JOHN P, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 LANE CREEK TER

City BISHOP	State GA	Zip Code 30621
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		01		2018

Transaction ID : SA11AI.23679

Amount of Each Receipt this Period
100.00

Memo Item

C. BEST 773, VICTORIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 MOSSY OAKS RD E

City SPRING	State TX	Zip Code 77389
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11AI.23691

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. BOEDEKER 779, MARVIN J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 904 W 6TH ST

City SHINER	State TX	Zip Code 77984
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BOEDEKER PLASTICS INC	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.23722

Amount of Each Receipt this Period
100.00

Memo Item

B. BORGERDING 563, GEORGE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 189

City BELGRADE	State MN	Zip Code 56312
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NORTH AMERICA STATE BANK	Occupation (for Individual) BANKER
---	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

Transaction ID : SA11AI.23732

Amount of Each Receipt this Period
100.00

Memo Item

C. BREMER 510, JUNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5177 HIGHWAY 20

City HOLSTEIN	State IA	Zip Code 51025
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

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

Transaction ID : SA11AI.23770

Amount of Each Receipt this Period
205.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	405.00
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 69
	<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)
TEA PARTY MAJORITY FUND

A. BREWER 735, FRED R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 376

City ELGIN	State OK	Zip Code 73538
---------------	-------------	-------------------

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

Name of Employer (for Individual) FRED BREWER SALES	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		13		2018

Transaction ID : SA11AI.23773

Amount of Each Receipt this Period
200.00

Memo Item

B. BRINSTER 586, LESLIE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12849 49TH ST SW

City BELFIELD	State ND	Zip Code 58622
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt

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

Transaction ID : SA11AI.23780

Amount of Each Receipt this Period
105.00

Memo Item

C. BRYDEN 100, ELIZABETH, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 W 67TH ST
APT 611

City NEW YORK	State NY	Zip Code 10023
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11AI.23799

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	410.00
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 12 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. BULLARD 853, BASIL E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1061 W DEL VALLE DR

City YUMA	State AZ	Zip Code 85364
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		14		2018

Transaction ID : SA11AI.23808

Amount of Each Receipt this Period
25.00

Memo Item

B. CAMERON 441, DAVID S, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6545 LIBERTY RD

City SOLON	State OH	Zip Code 44139
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11AI.23842

Amount of Each Receipt this Period
75.00

Memo Item

C. CAMERON 441, DAVID S, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6545 LIBERTY RD

City SOLON	State OH	Zip Code 44139
---------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2018

Transaction ID : SA11AI.23843

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	125.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CAMPANILE 208, GIANVITO, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4109 SPRUELL DR
 City KENSINGTON State MD Zip Code 20895
 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 ▼ 210.00

Date of Receipt 10 / 26 / 2018
Transaction ID : SA11AI.23844
 Amount of Each Receipt this Period 40.00
 Memo Item

B. CAMPBELL 313, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20950 GA HIGHWAY 144
 City RICHMOND HILL State GA Zip Code 31324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 19 / 2018
Transaction ID : SA11AI.23846
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CANNON 778, HAZEL, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5212 QUAKER RIDGE DR
 City COLLEGE STATION State TX Zip Code 77845
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2018
Transaction ID : SA11AI.23854
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	165.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CARPENTER 782, HARRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3101 MCHENRY DR

City SAN ANTONIO	State TX	Zip Code 78239
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2018

Transaction ID : SA11AI.23859

Amount of Each Receipt this Period

500.00

 Memo Item

B. CARROLL 751, MAURICE W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 719 AMHERST DR

City WAXAHACHIE	State TX	Zip Code 75165
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2018

Transaction ID : SA11AI.23862

Amount of Each Receipt this Period

100.00

 Memo Item

C. CASINO 191, MARYANN S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5912 KEYSTONE ST

City PHILADELPHIA	State PA	Zip Code 19135
----------------------	-------------	-------------------

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

Name of Employer (for Individual) TEMPLE UNIVERSITY HOSPITAL	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.23868

Amount of Each Receipt this Period

100.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 15 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CASTO 306, VIRGINIA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 RIVERHILL DR
APT 228

City ATHENS State GA Zip Code 30606

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 15.00

Date of Receipt
11 / 01 / 2018
Transaction ID : SA11AI.23871

Amount of Each Receipt this Period
- 15.00

Memo Item

B. CASTO 306, VIRGINIA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 RIVERHILL DR
APT 228

City ATHENS State GA Zip Code 30606

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 30.00

Date of Receipt
11 / 02 / 2018
Transaction ID : SA11AI.23872

Amount of Each Receipt this Period
- 15.00

Memo Item

C. CASTO 306, VIRGINIA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 RIVERHILL DR
APT 228

City ATHENS State GA Zip Code 30606

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
- 45.00

Date of Receipt
11 / 05 / 2018
Transaction ID : SA11AI.23870

Amount of Each Receipt this Period
- 15.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ - 45.00

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 16 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CHERRY 158, TONI M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 505

City DU BOIS	State PA	Zip Code 15801
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11AI.23885

Amount of Each Receipt this Period
 250.00

Memo Item

B. CODY 852, FRANCES, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7501 E THOMPSON PEAK PKWY UNIT

City SCOTTSDALE	State AZ	Zip Code 85255
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2018
Transaction ID : SA11AI.23915

Amount of Each Receipt this Period
 200.00

Memo Item

C. COLL 786, MARYELLEN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 GLENWOOD TRL

City CEDAR PARK	State TX	Zip Code 78613
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018
Transaction ID : SA11AI.23920

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
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 17 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. CONNOLLY 333, DOROTHY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8002 LAGOS DE CAMPO BLVD
 APT 306
 City FORT LAUDERDALE State FL Zip Code 33321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt 11 / 19 / 2018
Transaction ID : SA11AI.23926
 Amount of Each Receipt this Period 35.00
 Memo Item

B. COOK 721, REBA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3107 QUALITY DR
 City SEARCY State AR Zip Code 72143
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 14 / 2018
Transaction ID : SA11AI.23931
 Amount of Each Receipt this Period 100.00
 Memo Item

C. COONLY 787, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 W 3RD ST
 APT 3336
 City AUSTIN State TX Zip Code 78701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONLEY SPORTS INC Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 11 / 12 / 2018
Transaction ID : SA11AI.23932
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	235.00
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 69
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CORSON 847, LOIS, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 121

City GLENDALE	State UT	Zip Code 84729
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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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
10	/	29	/	2018

Transaction ID : SA11AI.23935

Amount of Each Receipt this Period
100.00

Memo Item

B. COTE 349, THOMAS J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6300 SE WINGED FOOT DR

City STUART	State FL	Zip Code 34997
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.23941

Amount of Each Receipt this Period
100.00

Memo Item

C. COUCH 244, RICHARD E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13803 BIRDAVEN LN

City GROTTOES	State VA	Zip Code 24441
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MACHINE OPERATOR
--	---

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
10	/	29	/	2018

Transaction ID : SA11AI.23942

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 19 OF 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CROWELL 302, THERESA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HAYES CIR
 City REX State GA Zip Code 30273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11AI.23965
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CROWELL 302, THERESA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 195 HAYES CIR
 City REX State GA Zip Code 30273
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.23964
 Amount of Each Receipt this Period 25.00
 Memo Item

C. CUTTLE 112, EUNICE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9201 SHORE RD
 APT A506
 City BROOKLYN State NY Zip Code 11209
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.23972
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 125.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. DALY 379, CHAD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 624 UNION CAMP LN

City KNOXVILLE	State TN	Zip Code 37934
-------------------	-------------	-------------------

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

Name of Employer (for Individual) JOHNSON & JOHNSON	Occupation (for Individual) SR MANAGER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2018

Transaction ID : SA11AI.23978

Amount of Each Receipt this Period
100.00

Memo Item

B. DANZE 787, LEO, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4722 TWIN VALLEY DR

City AUSTIN	State TX	Zip Code 78731
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.23982

Amount of Each Receipt this Period
100.00

Memo Item

C. DAVIES 801, JEANNE B, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3377 MILL VISTA RD
UNIT 3611

City HIGHLANDS RANCH	State CO	Zip Code 80129
-------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.23985

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 21 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. DAVIES 953, THOMAS E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2750 6TH AVE

City MERCED	State CA	Zip Code 95340
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11AI.23986

Amount of Each Receipt this Period
100.00

Memo Item

B. DUNN 767, CECIL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 317 APPALOOSA TRL

City WACO	State TX	Zip Code 76712
--------------	-------------	-------------------

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

Name of Employer (for Individual) DUNN'S BRAKE & TIRE	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11AI.24058

Amount of Each Receipt this Period
50.00

Memo Item

C. DUVERNELL 530, SCOTT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W64N625 HANOVER AVE
APT 104

City CEDARBURG	State WI	Zip Code 53012
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.24066

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 22 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. EDGERLY 021, LOIS S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 HIGHLAND ST

City CAMBRIDGE	State MA	Zip Code 02138
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.24084

Amount of Each Receipt this Period
25.00

Memo Item

B. ENGGREN 087, JOHN W, , MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 LAWRENCE AVE

City BAYVILLE	State NJ	Zip Code 08721
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	24	/	2018

Transaction ID : SA11AI.24103

Amount of Each Receipt this Period
55.00

Memo Item

C. FARQUHAR 349, JERRY L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32801 US HIGHWAY 441 N
LOT 118

City OKEECHOBEE	State FL	Zip Code 34972
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2018

Transaction ID : SA11AI.24118

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	180.00
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 23 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. FAUBION 797, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2726 ROCKY LANE RD
 City ODESSA State TX Zip Code 79762
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.24120
 Amount of Each Receipt this Period 75.00
 Memo Item

B. FEINBERG 753, LEWIS R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 560047
 City DALLAS State TX Zip Code 75356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LF & JA INVESTMENTS LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 24 / 2018
Transaction ID : SA11AI.24122
 Amount of Each Receipt this Period 55.00
 Memo Item

C. FERGUSON 726, CLAUDETTE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1278
 City HARRISON State AR Zip Code 72602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11AI.24123
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 230.00
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 24 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. FILLMORE 761, H DUSTIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 TEXAS ST
 APT 21102
 City FORT WORTH State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11AI.24131
 Amount of Each Receipt this Period 200.00
 Memo Item

B. FLEENOR 352, MARGARET L, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3517 LENOX RD
 City BIRMINGHAM State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.24136
 Amount of Each Receipt this Period 500.00
 Memo Item

C. FOGLEMAN 275, BETTY O, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 510
 City BUTNER State NC Zip Code 27509
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.24142
 Amount of Each Receipt this Period 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. FOLDENAUER 380, STEVEN L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 525 HEDGE ROSE BLVD

City SOMERVILLE	State TN	Zip Code 38068
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2018
Transaction ID : SA11AI.24144

Amount of Each Receipt this Period
 100.00

Memo Item

B. GARCIA 691, IRENE, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 LODGEPOLE RD

City SIDNEY	State NE	Zip Code 69162
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2018
Transaction ID : SA11AI.24178

Amount of Each Receipt this Period
 100.00

Memo Item

C. GAUSEWITZ 446, CARL G, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2483 WESTBROOK ST SE

City MAGNOLIA	State OH	Zip Code 44643
------------------	-------------	-------------------

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

Name of Employer (for Individual) GAUS APARTMENTS	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
365.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2018
Transaction ID : SA11AI.24187

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 26 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. GRAVELY 402, LAWRENCE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5507 BETH RD

City LOUISVILLE	State KY	Zip Code 40219
--------------------	-------------	-------------------

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

Name of Employer (for Individual) MILITARY ORDER OF WORLD WARS	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 26 / 2018
Transaction ID : SA11AI.24231

Amount of Each Receipt this Period
 100.00

Memo Item

B. GREBING 637, MILDRED L, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 398 PCR 428

City FROHNA	State MO	Zip Code 63748
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2018
Transaction ID : SA11AI.24235

Amount of Each Receipt this Period
 25.00

Memo Item

C. GREBING 637, MILDRED L, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 398 PCR 428

City FROHNA	State MO	Zip Code 63748
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
245.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2018
Transaction ID : SA11AI.24234

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. HADICK-BARKOCZY 852, ANDREW, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 E MESQUITE CIR
UNIT M129

City TEMPE State AZ Zip Code 85281

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
11 / 19 / 2018
Transaction ID : SA11AI.24254

Amount of Each Receipt this Period
50.00

Memo Item

B. HEARD 077, VICTORIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 761 RIVER RD

City FAIR HAVEN State NJ Zip Code 07704

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

Name of Employer (for Individual) EPISCOPAL CHURCH Occupation (for Individual) CLERGY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
11 / 07 / 2018
Transaction ID : SA11AI.24297

Amount of Each Receipt this Period
200.00

Memo Item

C. HICKMAN 781, ANDY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4432 HAECKERVILLE RD

City CIBOLO State TX Zip Code 78108

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

Name of Employer (for Individual) ON SEARCH PARTNERS Occupation (for Individual) EXECUTIVE RECRUITER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt
11 / 07 / 2018
Transaction ID : SA11AI.24327

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 28 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. HOLMBERG 441, TERRY L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7002 PLAINFIELD AVE

City CLEVELAND	State OH	Zip Code 44144
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.24360

Amount of Each Receipt this Period
50.00

Memo Item

B. HOLMES 969, LEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX AR

City HAGATNA	State GU	Zip Code 96932
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2018

Transaction ID : SA11AI.24364

Amount of Each Receipt this Period
250.00

Memo Item

C. HORN 234, WILLIAM C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 ARAGONA BLVD

City VIRGINIA BCH	State VA	Zip Code 23455
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		02		2018

Transaction ID : SA11AI.24368

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 29 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ILGEN 160, PAUL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 ASHLEY LN
 City SLIPPERY ROCK State PA Zip Code 16057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SPORTS R COOL INC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 11 / 21 / 2018
Transaction ID : SA11AI.24415
 Amount of Each Receipt this Period 50.00
 Memo Item

B. JOHNSON 758, MARTHA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4421 COUNTY ROAD 2611
 City OAKWOOD State TX Zip Code 75855
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 09 / 2018
Transaction ID : SA11AI.24437
 Amount of Each Receipt this Period 75.00
 Memo Item

C. KEENEY 231, LAVONNA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 WINSTON DR
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11AI.24471
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
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 30 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. KNEE 281, DAN A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 733 PLANTATION ESTATES DR
APT B211

City MATTHEWS	State NC	Zip Code 28105
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11AI.24508

Amount of Each Receipt this Period
75.00

Memo Item

B. KROPP 103, WESLEY W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COURT ST

City STATEN ISLAND	State NY	Zip Code 10304
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) WESLEY KROPP DESIGNS	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		12		2018

Transaction ID : SA11AI.24531

Amount of Each Receipt this Period
500.00

Memo Item

C. KROPP 103, WESLEY W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COURT ST

City STATEN ISLAND	State NY	Zip Code 10304
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) WESLEY KROPP DESIGNS	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		26		2018

Transaction ID : SA11AI.24532

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	675.00
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 31 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. KURZET 926, ANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33762 VALLE RD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

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
11		19		2018

Transaction ID : SA11AI.24537

Amount of Each Receipt this Period
250.00

Memo Item

B. LINTHORST 105, PAUL E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19 HUNTWOOD PL

City MOUNT VERNON	State NY	Zip Code 10552
----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : SA11AI.24582

Amount of Each Receipt this Period
50.00

Memo Item

C. LOVELESS 346, CHARLOTTE M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2559 COMMERCE AVE

City SPRING HILL	State FL	Zip Code 34609
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11AI.24604

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 32 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. LUICHINGER 559, THOMAS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 7TH AVE NE

City ROCHESTER	State MN	Zip Code 55906
-------------------	-------------	-------------------

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

Name of Employer (for Individual) ACR HOMES	Occupation (for Individual) BUILDER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2018

Transaction ID : SA11AI.24608

Amount of Each Receipt this Period
50.00

Memo Item

B. MAGNUSON 852, MAMIE, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7255 E BROADWAY RD APT 246

City MESA	State AZ	Zip Code 85208
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.24626

Amount of Each Receipt this Period
60.00

Memo Item

C. MAINE 486, JACK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3132 WEISS ST

City SAGINAW	State MI	Zip Code 48602
-----------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : SA11AI.24632

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	160.00
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 33 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MANSON 011, JANICE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 748 SAINT JAMES AVE
 APT 5
 City SPRINGFIELD State MA Zip Code 01104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2018
Transaction ID : SA11AI.24642
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. MARKLEY 368, A H, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1055 N COLLEGE ST
 City AUBURN State AL Zip Code 36830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 09 / 2018
Transaction ID : SA11AI.24646
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. MCKINNEY 286, DENNY C, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 584 ISLAND FORD RD
 City STATESVILLE State NC Zip Code 28625
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2018
Transaction ID : SA11AI.24693
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	370.00
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 34 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MCREYNOLDS 774, VON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25006 CINCO MANOR LN

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11AI.24702

Amount of Each Receipt this Period
100.00

Memo Item

B. MCREYNOLDS 774, VON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25006 CINCO MANOR LN

City KATY	State TX	Zip Code 77494
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	20	/	2018

Transaction ID : SA11AI.24703

Amount of Each Receipt this Period
50.00

Memo Item

C. MESSER 610, GENE J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2355 GURLER RD

City ASHTON	State IL	Zip Code 61006
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2018

Transaction ID : SA11AI.24717

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
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 35 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. MEYER 220, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10010 EASTLAKE DR

City FAIRFAX	State VA	Zip Code 22032
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		07		2018

Transaction ID : SA11AI.24718

Amount of Each Receipt this Period
50.00

Memo Item

B. MEYER 431, JAMES E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 163 EDISON AVE

City CIRCLEVILLE	State OH	Zip Code 43113
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2018

Transaction ID : SA11AI.24719

Amount of Each Receipt this Period
50.00

Memo Item

C. MILTON 308, JAMES R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3548 NOAH STATION RD

City KEYSVILLE	State GA	Zip Code 30816
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2018

Transaction ID : SA11AI.24730

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.00
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 36 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. MINTON 217, DAVID S, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7949 MCKAIG RD

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

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID : SA11AI.24731

Amount of Each Receipt this Period

100.00

 Memo Item

B. MOELLER 820, RON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1295 ROAD 135

City CHEYENNE	State WY	Zip Code 82009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2018

Transaction ID : SA11AI.24735

Amount of Each Receipt this Period

100.00

 Memo Item

C. MOORHOUSE 550, JOYCE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2763 310TH ST

City CANNON FALLS	State MN	Zip Code 55009
----------------------	-------------	-------------------

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

Name of Employer (for Individual) MILTON CROP IN SAINT LOUIS	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		15		2018

Transaction ID : SA11AI.24751

Amount of Each Receipt this Period

100.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 37 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. MORGADO 331, RUBY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5065 NW 74TH AVE
UNIT 9

City MIAMI State FL Zip Code 33166

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

Name of Employer (for Individual) BTX GLOBAL LOGISTICS Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 06 / 2018
Transaction ID : SA11AI.24758

Amount of Each Receipt this Period
100.00

Memo Item

B. MORGAN 450, DAVID R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6941 HAMILTON MASON RD

City WEST CHESTER State OH Zip Code 45069

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

Name of Employer (for Individual) KROGER'S Occupation (for Individual) SALES

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
11 / 13 / 2018
Transaction ID : SA11AI.24760

Amount of Each Receipt this Period
75.00

Memo Item

C. MURRAY 283, DOROTHY M, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 224 BETHUNE ST

City FAYETTEVILLE State NC Zip Code 28305

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 26 / 2018
Transaction ID : SA11AI.24784

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	205.00
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 38 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. NELSON 936, DON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1901 W CLEVELAND AVE

City MADERA	State CA	Zip Code 93637
----------------	-------------	-------------------

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

Name of Employer (for Individual) MIDLAND TRACTOR COMPANY	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	06	/	2018

Transaction ID : SA11AI.24813

Amount of Each Receipt this Period
50.00

Memo Item

B. NOZNISKY 142, SARAH A, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 54 HARDING AVE

City BUFFALO	State NY	Zip Code 14217
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.24826

Amount of Each Receipt this Period
100.00

Memo Item

C. OCONNOR 802, PAT, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 735 S POPLAR ST

City DENVER	State CO	Zip Code 80224
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2018

Transaction ID : SA11AI.24828

Amount of Each Receipt this Period
101.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	251.00
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 39 OF 69
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ORTH 664, JAMES W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1306 SHAMROCK ST

City JUNCTION CITY	State KS	Zip Code 66441
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

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

Transaction ID : SA11AI.24840

Amount of Each Receipt this Period
100.00

Memo Item

B. PALAGANAS 275, MARYJANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 SUSAN CIR

City GOLDSBORO	State NC	Zip Code 27530
-------------------	-------------	-------------------

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

Name of Employer (for Individual) MJP VISIONS REALTY LLC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2018

Transaction ID : SA11AI.24857

Amount of Each Receipt this Period
50.00

Memo Item

C. PARKER 786, OWEN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6476 S STATE HIGHWAY 16

City FREDERICKSBURG	State TX	Zip Code 78624
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	25	/	2018

Transaction ID : SA11AI.24864

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 40 OF 69
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<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. PARRISH 721, MARY K, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUGAR CRK CT

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2018
Transaction ID : SA11AI.24865

Amount of Each Receipt this Period
 100.00

Memo Item

B. PARRISH 721, MARY K, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 SUGAR CRK CT

City NORTH LITTLE ROCK	State AR	Zip Code 72116
---------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 26 / 2018
Transaction ID : SA11AI.24866

Amount of Each Receipt this Period
 300.00

Memo Item

C. PASCHALL 801, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13775 WOODLAKE RD

City ELBERT	State CO	Zip Code 80106
----------------	-------------	-------------------

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

Name of Employer (for Individual) MASONITE INT	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11AI.24869

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 41 OF 69
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	<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)
TEA PARTY MAJORITY FUND

A. PATINO 303, CHRISTINE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 711 COSMOPOLITAN DR NE
 UNIT 335
 City ATLANTA State GA Zip Code 30324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CENTURION Occupation (for Individual) RISK MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 05 / 2018
Transaction ID : SA11AI.24870
 Amount of Each Receipt this Period 100.00
 Memo Item

B. PENNY 708, ALBERT J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15044 BANFF CT
 City BATON ROUGE State LA Zip Code 70819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 18 / 2018
Transaction ID : SA11AI.24876
 Amount of Each Receipt this Period 100.00
 Memo Item

C. PETTIT 746, RONALD WAYNE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4901 W OAKLAND AVE
 City PONCA CITY State OK Zip Code 74601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 11 / 02 / 2018
Transaction ID : SA11AI.24888
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 42 OF 69
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. PHILLIPS 773, BISHOP, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21157 PINETEX ST

City NEW CANEY	State TX	Zip Code 77357
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2018

Transaction ID : SA11AI.24892

Amount of Each Receipt this Period
100.00

Memo Item

B. PITCAIRN 190, BEATRICE S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1620 HUNTINGDON RD

City HUNTINGDON VY	State PA	Zip Code 19006
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11AI.24901

Amount of Each Receipt this Period
200.00

Memo Item

C. PLEAKE 799, KENNETH F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3125 ZION LN

City EL PASO	State TX	Zip Code 79904
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11AI.24906

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 43 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. PLEW 951, BRIAN P, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15270 WINTON WAY

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

Transaction ID : SA11AI.24907

Amount of Each Receipt this Period
100.00

Memo Item

B. POWELL 321, NICKOLAS H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16815 SE 52ND PL

City OCKLAWAHA	State FL	Zip Code 32179
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	07	/	2018

Transaction ID : SA11AI.24923

Amount of Each Receipt this Period
20.00

Memo Item

C. PURCELL 208, NORMA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10801 ROCK RUN DR

City POTOMAC	State MD	Zip Code 20854
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
560.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2018

Transaction ID : SA11AI.24939

Amount of Each Receipt this Period
155.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
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 44 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. PURDY 042, MAUREEN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 GREAT OAKS LN

City OXFORD	State ME	Zip Code 04270
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		05		2018

Transaction ID : SA11AI.24940

Amount of Each Receipt this Period
200.00

Memo Item

B. QUACKENBUSH 660, DANIEL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1405 S LAKESTONE DR

City OLATHE	State KS	Zip Code 66061
----------------	-------------	-------------------

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

Name of Employer (for Individual) QUACKENBUSH & ASSOCIATES INC	Occupation (for Individual) ARCHITECH
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11AI.24942

Amount of Each Receipt this Period
100.00

Memo Item

C. RADTKE 530, MARILYN M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W176N12452 FOND DU LAC AVE

City GERMANTOWN	State WI	Zip Code 53022
--------------------	-------------	-------------------

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

Name of Employer (for Individual) W@E RADTKE	Occupation (for Individual) OFFICE WORKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11AI.24947

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 45 OF 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. RADTKE 530, MARILYN M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address W176N12452 FOND DU LAC AVE
 City GERMANTOWN State WI Zip Code 53022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) W@E RADTKE Occupation (for Individual) OFFICE WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 16 / 2018
Transaction ID : SA11AI.24948
 Amount of Each Receipt this Period - 100.00
 Memo Item

B. REGES 078, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 SKYTOP RD
 City ANDOVER State NJ Zip Code 07821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 19 / 2018
Transaction ID : SA11AI.24971
 Amount of Each Receipt this Period 100.00
 Memo Item

C. RHOADS 750, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 963
 City ADDISON State TX Zip Code 75001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SRI Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.24979
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 46 OF 69
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. RHOADS 750, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 963

City ADDISON	State TX	Zip Code 75001
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 14 / 2018
Transaction ID : SA11AI.24978

Amount of Each Receipt this Period
100.00

Memo Item

B. ROEPKE 373, ROSS G, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1102 BRAGG CIR

City TULLAHOMA	State TN	Zip Code 37388
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 31 / 2018
Transaction ID : SA11AI.25010

Amount of Each Receipt this Period
50.00

Memo Item

C. ROSA 601, KATHLEEN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2580 FOXFIELD RD
 STE 101

City SAINT CHARLES	State IL	Zip Code 60174
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 12 / 2018
Transaction ID : SA11AI.25019

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
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 47 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. ROSE 242, GARY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 184 SR DR

City CLINTWOOD	State VA	Zip Code 24228
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
320.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.25022

Amount of Each Receipt this Period
55.00

Memo Item

B. ROWLAND 427, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 797 R W THOMPSON RD

City GREENSBURG	State KY	Zip Code 42743
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11AI.25029

Amount of Each Receipt this Period
100.00

Memo Item

C. RUSSELL 770, VALE A, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1922 OLYMPIA DR

City HOUSTON	State TX	Zip Code 77019
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2018

Transaction ID : SA11AI.25038

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.00
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 48 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. SAN ANTONIO 118, THOMAS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 ARGYLE RD

City PLAINVIEW	State NY	Zip Code 11803
-------------------	-------------	-------------------

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

Name of Employer (for Individual) TLS CONTRACTING	Occupation (for Individual) CONTRACTOR
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2018

Transaction ID : SA11AI.25052

Amount of Each Receipt this Period
50.00

Memo Item

B. SAUBAN 303, ROBERT L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 671 GREENVIEW AVE NE

City ATLANTA	State GA	Zip Code 30305
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : SA11AI.25057

Amount of Each Receipt this Period
250.00

Memo Item

C. SCHNEIDER 070, EARL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 HORIZON RD
APT 2909

City FORT LEE	State NJ	Zip Code 07024
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2018

Transaction ID : SA11AI.25071

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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 49 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. SCOTT 296, CAROL G, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 N MAIN ST APT 202

City GREENVILLE	State SC	Zip Code 29601
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.25087

Amount of Each Receipt this Period
150.00

Memo Item

B. SEIBERT 750, RALPH, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1422 WELLESLEY DR

City LEWISVILLE	State TX	Zip Code 75067
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
825.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2018

Transaction ID : SA11AI.25096

Amount of Each Receipt this Period
500.00

Memo Item

C. SHARRATT 330, LAURA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4730 FILLMORE ST

City HOLLYWOOD	State FL	Zip Code 33021
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) RESTAURANT OWNER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2018

Transaction ID : SA11AI.25105

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1650.00
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 50 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. SHEARER 773, JACK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13519 SUMMER HILL DR

City MONTGOMERY	State TX	Zip Code 77356
--------------------	-------------	-------------------

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

Name of Employer (for Individual) INTEGRA INVESTMENTS LLC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2018

Transaction ID : SA11AI.25110

Amount of Each Receipt this Period
100.00

Memo Item

B. SHEPHERD 774, FRED H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3310 ORCHARD GATE ST

City SUGAR LAND	State TX	Zip Code 77479
--------------------	-------------	-------------------

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 ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2018

Transaction ID : SA11AI.25117

Amount of Each Receipt this Period
100.00

Memo Item

C. SIEGEL 134, JIM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 614 CALVERT ST

City ROME	State NY	Zip Code 13440
--------------	-------------	-------------------

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

Name of Employer (for Individual) BRAVOS MACHINE SHOP & SUPPLY	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2018

Transaction ID : SA11AI.25123

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
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 51 OF 69
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. SKINNER 502, BEVERLY, , MS,
Mailing Address 2724 KENDALL ST

City OSCEOLA	State IA	Zip Code 50213
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SKINNER SHAG SERVICE INC		Occupation (for Individual) SECRETARY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
10 / 24 / 2018
Transaction ID : SA11AI.25133

Amount of Each Receipt this Period
100.00

Memo Item

B. SMITH 543, DANIEL, , MR,
Mailing Address 240 SEMINOLE LN

City GREEN BAY	State WI	Zip Code 54313
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) AUTHOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 19 / 2018
Transaction ID : SA11AI.25148

Amount of Each Receipt this Period
50.00

Memo Item

C. STEVERSON 730, LARRY, , MR,
Mailing Address 205 SE 3RD ST

City TUTTLE	State OK	Zip Code 73089
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 22 / 2018
Transaction ID : SA11AI.25211

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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 52 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. STONE 315, TERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 504 BAXLEY HWY

City HAZLEHURST	State GA	Zip Code 31539
--------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	02	/	2018

Transaction ID : SA11AI.25215

Amount of Each Receipt this Period
175.00

Memo Item

B. STONE 562, MARION, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 220 SOUTH PRAIRE AVE

City PORTER	State MN	Zip Code 56280
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : SA11AI.25216

Amount of Each Receipt this Period
100.00

Memo Item

C. STREBL 949, STEPHAN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 102 VAN TASSEL CT

City SAN ANSELMO	State CA	Zip Code 94960
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HAPI DOG PRODUCTS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	18	/	2018

Transaction ID : SA11AI.25222

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
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 53 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. STRIBLING 790, CAROL, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8600 PEAR RD

City PAMPA	State TX	Zip Code 79065
---------------	-------------	-------------------

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

Name of Employer (for Individual) STRIBLING MANAGEMENT LLC	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2018

Transaction ID : SA11AI.25223

Amount of Each Receipt this Period
25.00

Memo Item

B. SZANTAY 606, RUTH, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6000 N SHERIDAN RD APT 214

City CHICAGO	State IL	Zip Code 60660
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2018

Transaction ID : SA11AI.25243

Amount of Each Receipt this Period
35.00

Memo Item

C. TATE 601, WILLIAM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1050 S EUCLID AVE
UNIT 3305

City ELMHURST	State IL	Zip Code 60126
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2018

Transaction ID : SA11AI.25254

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	185.00
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 54 OF 69
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. TOWNSEND 755, SANDRA, , MS,
Mailing Address 13 SARAH LN

City TEXARKANA	State TX	Zip Code 75503
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 30 / 2018

Transaction ID : SA11AI.25290

Amount of Each Receipt this Period
150.00

Memo Item

B. TOWNSEND 759, JOANN B, , MRS,
Mailing Address 692 FENLEY FLAT RD

City POLLOK	State TX	Zip Code 75969
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 19 / 2018

Transaction ID : SA11AI.25291

Amount of Each Receipt this Period
10.00

Memo Item

C. TREDINICK 322, SUE B, , MS,
Mailing Address 9250 BAYMEADOWS RD
STE 400

City JACKSONVILLE	State FL	Zip Code 32256
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
11 / 07 / 2018

Transaction ID : SA11AI.25295

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 55 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. TURNBULL 750, WADE W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2791 WATERWAY DR
 City GRAND PRAIRIE State TX Zip Code 75054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11AI.25307
 Amount of Each Receipt this Period 200.00
 Memo Item

B. TUROWSKI 601, DANIEL M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 924 N PRATER AVE
 City MELROSE PARK State IL Zip Code 60164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SLOAN Occupation (for Individual) MACHINIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 10 / 31 / 2018
Transaction ID : SA11AI.25312
 Amount of Each Receipt this Period 250.00
 Memo Item

C. VANHORN 206, BRUCE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2432 PINEFIELD RD
 City WALDORF State MD Zip Code 20601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 07 / 2018
Transaction ID : SA11AI.25327
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
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 56 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. VANMETER 050, WHITAM, , DR, DDS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 MOUNTAIN AVE
 City WOODSTOCK State VT Zip Code 05091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DENTIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 29 / 2018
Transaction ID : SA11AI.25328
 Amount of Each Receipt this Period 250.00
 Memo Item

B. VEARD 440, JON R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9733 QUARRY RD
 City AMHERST State OH Zip Code 44001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 09 / 2018
Transaction ID : SA11AI.25335
 Amount of Each Receipt this Period 300.00
 Memo Item

C. VESTER 721, RAY E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SMITH VESTER RD
 City STUTTGART State AR Zip Code 72160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 23 / 2018
Transaction ID : SA11AI.25337
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	650.00
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 57 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. WADHOLM 587, ARLYN A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8951 32ND ST NW

City NEW TOWN	State ND	Zip Code 58763
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2018

Transaction ID : SA11AI.25352

Amount of Each Receipt this Period
500.00

Memo Item

B. WADHOLM 587, ARLYN A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8951 32ND ST NW

City NEW TOWN	State ND	Zip Code 58763
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2018

Transaction ID : SA11AI.25351

Amount of Each Receipt this Period
1000.00

Memo Item

C. WALIMA 959, SUSAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14333 COUNTRYSIDE RANCH RD

City GRASS VALLEY	State CA	Zip Code 95949
----------------------	-------------	-------------------

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

Name of Employer (for Individual) CA HERITAGE COUNCIL	Occupation (for Individual) BOARD MEMBER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2018

Transaction ID : SA11AI.25359

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 58 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. WALSH 331, BETTY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5471 SW 70TH PL N

City MIAMI	State FL	Zip Code 33155
---------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2018

Transaction ID : SA11AI.25365

Amount of Each Receipt this Period

30.00

 Memo Item

B. WEBER 549, JULIE A, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address E4335 MILLER RD

City OGDENSBURG	State WI	Zip Code 54962
--------------------	-------------	-------------------

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

Name of Employer (for Individual) MILWAUKEE COUNTY HOSPITAL	Occupation (for Individual) MEDICAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2018

Transaction ID : SA11AI.25379

Amount of Each Receipt this Period

25.00

 Memo Item

C. WEBER 549, JULIE A, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address E4335 MILLER RD

City OGDENSBURG	State WI	Zip Code 54962
--------------------	-------------	-------------------

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

Name of Employer (for Individual) MILWAUKEE COUNTY HOSPITAL	Occupation (for Individual) MEDICAL
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		21		2018

Transaction ID : SA11AI.25380

Amount of Each Receipt this Period

20.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 59 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. WENDLING 440, PATRICK, , MR,
Mailing Address 36630 HAYSTACKS LN

City GRAFTON	State OH	Zip Code 44044
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) STATE OF OH		Occupation (for Individual) FLOODPLAIN MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
11 / 06 / 2018
Transaction ID : SA11AI.25388

Amount of Each Receipt this Period
50.00

Memo Item

B. WHITE 809, SIDNEY, , MR,
Mailing Address 1420 N GATE BLVD

City COLORADO SPRINGS	State CO	Zip Code 80921
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
10 / 22 / 2018
Transaction ID : SA11AI.25410

Amount of Each Receipt this Period
50.00

Memo Item

C. WIGGINS 277, ELIZABETH, , MS,
Mailing Address 5715 GREENBAY DR

City DURHAM	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 330.00

Date of Receipt
11 / 16 / 2018
Transaction ID : SA11AI.25420

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	140.00
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 60 OF 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
TEA PARTY MAJORITY FUND

A. WILLETT 484, DONALD A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3557 KINGS MILL RD

City NORTH BRANCH	State MI	Zip Code 48461
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

Transaction ID : SA11AI.25428

Amount of Each Receipt this Period
350.00

Memo Item

B. WITCHER 720, FRANK J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1512 N LINCOLN ST

City CABOT	State AR	Zip Code 72023
---------------	-------------	-------------------

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

Name of Employer (for Individual) STEVENSON INC	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2018

Transaction ID : SA11AI.25448

Amount of Each Receipt this Period
75.00

Memo Item

C. WITTORF 554, SHARON, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4617 VALLACHER AVE

City MINNEAPOLIS	State MN	Zip Code 55416
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

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

Transaction ID : SA11AI.25449

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
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 61 OF 69
	<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)
TEA PARTY MAJORITY FUND

A. WOOD 295, BARBARA T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 21ST AVE S

City N MYRTLE BCH	State SC	Zip Code 29582
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		16		2018

Transaction ID : SA11AI.25456

Amount of Each Receipt this Period
100.00

Memo Item

B. YEATON 480, BRENDA L, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32868 BROOKWOOD LN

City FRANKLIN	State MI	Zip Code 48025
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2018

Transaction ID : SA11AI.25481

Amount of Each Receipt this Period
105.00

Memo Item

C. YSBRAND 570, CRAIG, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1704 15TH ST S

City BROOKINGS	State SD	Zip Code 57006
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
285.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		26		2018

Transaction ID : SA11AI.25489

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.00
TOTAL This Period (last page this line number only).....	21101.00

**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)
TEA PARTY MAJORITY FUND

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1920 MCKINNEY AVE
7th FLOOR

City DALLAS State TX Zip Code 75201

Purpose of Disbursement CREDIT CARD PROCESSING FEES

Candidate Name TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 26 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25535
Amount of Each Disbursement this Period: 42.68

Category/Type: 001

Memo Item

B. BAKER HOSTETLER LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1050 CONNECTICUT AVE NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement LEGAL SERVICES

Candidate Name TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25498
Amount of Each Disbursement this Period: 2500.00

Category/Type: 001

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement BANK FEE: AMEX COLLECTION FEE

Candidate Name TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25500
Amount of Each Disbursement this Period: 7.95

Category/Type: 001

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2550.63

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CAPITALONE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	8

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

FEC Identification Number

C C00566174

Purpose of Disbursement
BANK FEE: AMEX DISCOUNT FEES

001

Transaction ID : SB21B.25499

Candidate Name
TEA PARTY MAJORITY FUND

Category/
Type

Amount of Each Disbursement this Period

152.00

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

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	8

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

FEC Identification Number

C C00566174

Purpose of Disbursement
BANK FEE: MERCHANT SERVICE FEES

001

Transaction ID : SB21B.25501

Candidate Name
TEA PARTY MAJORITY FUND

Category/
Type

Amount of Each Disbursement this Period

518.21

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

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	1	8

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

FEC Identification Number

C C00566174

Purpose of Disbursement
BANK FEE: MERCHANT DISCOUNT FEES

001

Transaction ID : SB21B.25502

Candidate Name
TEA PARTY MAJORITY FUND

Category/
Type

Amount of Each Disbursement this Period

72.46

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

Memo Item

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

742.67

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)
TEA PARTY MAJORITY FUND

A. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: MERCHANT INTERCHANGE FEES

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 11 / 05 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25503
Amount of Each Disbursement this Period: 1061.60

Memo Item

B. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: USA ePAY

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 11 / 07 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25504
Amount of Each Disbursement this Period: 20.00

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DRIVE

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: ACCOUNT ANALYSIS FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 11 / 16 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.25537
Amount of Each Disbursement this Period: 272.42

Memo Item

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

1354.02

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)
TEA PARTY MAJORITY FUND

A. HINES DIGITAL

Full Name (Last, First, Middle Initial)

Mailing Address 6 HOLLIBEN CT

City SEVERNA PARK State MD Zip Code 21146

Purpose of Disbursement LIST RENTALS

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C00566174

Transaction ID : SB21B.25532

Amount of Each Disbursement this Period: 166.09

Memo Item

B. HINES DIGITAL

Full Name (Last, First, Middle Initial)

Mailing Address 6 HOLLIBEN CT

City SEVERNA PARK State MD Zip Code 21146

Purpose of Disbursement LIST RENTALS

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 26 / 2018

FEC Identification Number: C00566174

Transaction ID : SB21B.25533

Amount of Each Disbursement this Period: 412.50

Memo Item

C. MACKENZIE & COMPANY

Full Name (Last, First, Middle Initial)

Mailing Address 2776 S ARLINGTON MILL DRIVE
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement CONSULTING - COMPLIANCE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2018

FEC Identification Number: C00566174

Transaction ID : SB21B.25505

Amount of Each Disbursement this Period: 3500.00

Memo Item

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

4078.59

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

8725.91

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. JOHN JAMES FOR SENATE INC

Date of Disbursement: / /

Mailing Address: PO BOX 27363

City: LANSING State: MI Zip Code: 48909

Purpose of Disbursement: POLITICAL CONTRIBUTION Category/Type:

Candidate Name: JAMES, JOHN, , ,

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

State: MI District: 00

FEC Identification Number:
Transaction ID : **SB23.25523**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. JOSH HAWLEY FOR SENATE

Date of Disbursement: / /

Mailing Address: 150 LONG ROAD, SUITE 50

City: CHESTERFIELD State: MO Zip Code: 63005

Purpose of Disbursement: POLITICAL CONTRIBUTION Category/Type:

Candidate Name: HAWLEY, JOSHUA DAVID, , ,

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

State: MO District: 00

FEC Identification Number:
Transaction ID : **SB23.25524**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. MATT ROSENDALE FOR MONTANA

Date of Disbursement: / /

Mailing Address: PO BOX 4907

City: HELENA State: MT Zip Code: 59604

Purpose of Disbursement: POLITICAL CONTRIBUTION Category/Type:

Candidate Name: ROSENDALE, MATT, , ,

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

State: MT District: 00

FEC Identification Number:
Transaction ID : **SB23.25525**
Amount of Each Disbursement this Period:
 Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
TEA PARTY MAJORITY FUND

A. MCSALLY FOR SENATE INC

Full Name (Last, First, Middle Initial)
Mailing Address 2141 E CAMELBACK ROAD STE 250

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name MCSALLY, MARTHA, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: AZ District: 00

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C00666040
Transaction ID : SB23.25526
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. MIKE BRAUN FOR INDIANA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 159

City ZIONSVILLE State IN Zip Code 46077

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name BRAUN, MIKE, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: IN District: 00

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C00653147
Transaction ID : SB23.25527
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. RICK SCOTT FOR FLORIDA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 3791

City TALLAHASSEE State FL Zip Code 32315

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name SCOTT, RICK GOV, , ,

Office Sought: House Senate President

Disbursement For: 2018 Primary General Other (specify) ▼

State: FL District: 00

Date of Disbursement: 10 / 31 / 2018

FEC Identification Number: C00676965
Transaction ID : SB23.25528
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	30000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 68 OF 69
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor INFOCISION MANAGEMENT CORP			Nature of Debt (Purpose): PHONE BANK: VOTER CONTACT CALLS
Mailing Address 325 SPRINGSIDE DRIVE			
City AKRON	State OH	Zip Code 44333	

Outstanding Balance Beginning This Period 71248.10	Transaction ID : SD10.10540	
Amount Incurred This Period 0.00	Payment This Period 38635.17	Outstanding Balance at Close of This Period 32612.93

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	32612.93
2) TOTALS This Period (last page this line number only)..... ▶	32612.93
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	32612.93

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) TEA PARTY MAJORITY FUND	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00566174 </div>
---	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 10 / 2018	
Mailing Address 325 SPRINGSIDE DRIVE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 19354.84 </div>	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.25529 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2018
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate: TRUMP, DONALD J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 143966.04 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item INFOCISION MANAGEMENT CORP		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 07 / 10 / 2018	
Mailing Address 325 SPRINGSIDE DRIVE		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 19280.33 </div>	
City AKRON	State OH	Zip Code 44333	Transaction ID : SE.25530 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 07 / 2018
Purpose of Expenditure VOTER CONTACT CALLS		Category/Type 004	
Name of Federal Candidate: TRUMP, DONALD J, ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: 00 State:	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 163246.37 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 38635.17 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;"> 38635.17 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

MACKENZIE, SCOTT B, ,
 Signature

 [Electronically Filed]

 Date M M / D D / Y Y Y Y Y Y
 12 / 04 / 2018