

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Reclaim America PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="135583.52"/>	<input type="text" value="135583.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="253230.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="46642.71"/>	<input type="text" value="444272.72"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="299873.03"/>	<input type="text" value="579856.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="129973.53"/>	<input type="text" value="409956.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="169899.50"/>	<input type="text" value="169899.50"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name
Reclaim America PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 24 / 2020 To: M M / D D / Y Y Y Y 12 / 31 / 2020

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).....	5500.00	109000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5500.00	109000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	29500.00	318000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	35000.00	427000.00
12. Transfers From Affiliated/Other Party Committees.....	11642.71	11642.71
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	630.01
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	5000.00
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)).....▶	46642.71	444272.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	46642.71	444272.72

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	49973.53	230456.74
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	49973.53	230456.74
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	80000.00	179500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	129973.53	409956.74
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	129973.53	409956.74

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)	35000.00	427000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35000.00	427000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	49973.53	230456.74
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	630.01
38. Net Operating Expenditures (subtract Line 37 from Line 36)	49973.53	229826.73

**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 28
	<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)
Reclaim America PAC

A. BAYNARD, ERNEST, CORNISH, , IV
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5820 PLAINVIEW RD.
 City BETHESDA State MD Zip Code 20817-6151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MERIDIAN HILL STRATEGIES Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 12 / 02 / 2020
Transaction ID : SA11A.1396044
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

B. FUENTES, JOSE, A., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1000 MAINE AVE SW STE 400
 City WASHINGTON State DC Zip Code 20024-3494
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EASTPORT STRATEGIES LLC Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 12 / 07 / 2020
Transaction ID : SA11A.1397329
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. REPLOGLE, STEPHEN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5407 MACOMB ST., NW
 City WASHINGTON State DC Zip Code 20016-5308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COVE STRATEGIES Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 02 / 2020
Transaction ID : SA11A.1396043
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 7 OF 28
(check only one)

<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)
Reclaim America PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. SCHWARTZ, DOUGLAS, H., MR.,

Mailing Address 322 5TH ST. ,SE

City WASHINGTON	State DC	Zip Code 20003-2048
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILL NORTH LLC	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2020

Transaction ID : SA11A.1396045

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. CHARTER COMMUNICATIONS, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 400 ATLANTIC STREET
 10TH FLOOR
 City STAMFORD State CT Zip Code 06901-3512
 FEC ID number of contributing federal political committee. **C** C00426775
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2020
Transaction ID : SA11C.1420906
 Amount of Each Receipt this Period
 5000.00
 Memo Item
CONTRIBUTION

B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2980 FAIRVIEW PARK DRIVE
 City FALLS CHURCH State VA Zip Code 22042-4511
 FEC ID number of contributing federal political committee. **C** C00088591
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : SA11C.1420973
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

C. FEDEX CORPORATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 942 S SHADY GROVE ROAD
 City MEMPHIS State TN Zip Code 38120-4117
 FEC ID number of contributing federal political committee. **C** C00068692
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2020
Transaction ID : SA11C.1420907
 Amount of Each Receipt this Period
 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. INTL CEMETERY CREMATION AND FUNERAL ASSN. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 CARPENTER DR STE 100

City STERLING	State VA	Zip Code 20164-4468
FEC ID number of contributing federal political committee. C C00385195		
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 ▼ 3000.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 07 / 2020
Transaction ID : SA11C.1397331

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. INTL CEMETERY CREMATION AND FUNERAL ASSN. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 107 CARPENTER DR STE 100

City STERLING	State VA	Zip Code 20164-4468
FEC ID number of contributing federal political committee. C C00385195		
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 ▼ 3000.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2020
Transaction ID : SA11C.1420972

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. NFIB-NATIONAL FED OF INDEPENDENT BUSINESS FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 555 12TH ST NW
SUITE 1001

City WASHINGTON	State DC	Zip Code 20004-1267
FEC ID number of contributing federal political committee. C C00101105		
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 ▼ 2500.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2020
Transaction ID : SA11C.1420970

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
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 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. PNC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 249 FIFTH AVENUE, 21ST FLOOR

City PITTSBURGH	State PA	Zip Code 15222-2707
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FEC ID number of contributing federal political committee. **C** C00035519

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2020

Transaction ID : SA11C.1397330

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. SOUTHERN COMPANY EMPLOYEES PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 241 RALPH MCGILL BLVD. NE

City ATLANTA	State GA	Zip Code 30308-3374
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FEC ID number of contributing federal political committee. **C** C00144774

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

Transaction ID : SA11C.1420974

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1155 F. STREET NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20004-1346
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FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2020

Transaction ID : SA11C.1420905

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. WALMART INC. PAC FOR RESPONSIBLE GOVERNMENT

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

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-6209
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FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2020

Transaction ID : SA11C.1420971

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	29500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. RUBIO VICTORY COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11642.71

Date of Receipt
MM / DD / YYYY
12 / 31 / 2020

Transaction ID : SA12.1421706

Amount of Each Receipt this Period
11642.71

Memo Item
TRANSFER
DIST OF NET JFC PROCEEDS-SEE MEMOS

B. ALVAREZ, MAXIMO, RICARDO, MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4834 NW 94TH DORAL PLACE
SUITE 109

City DORAL State FL Zip Code 33178-2046

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

Name of Employer (for Individual) Occupation (for Individual)
SUNSHINE GASOLINE DISTRIBUTORS, INC. PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2020

Transaction ID : SA.1333535.1.1220

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

C. GATTI, WALTER, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 722 LOGGERHEAD ISLAND DR.

City SATELLITE BEACH State FL Zip Code 32937-3847

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

Name of Employer (for Individual) Occupation (for Individual)
TENSOR ENGINEERING CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2100.00

Date of Receipt
MM / DD / YYYY
09 / 09 / 2020

Transaction ID : SA.1378716.1.1220

Amount of Each Receipt this Period
2100.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	11642.71
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 28
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. MENG, BEN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8101 ANDERSON RD.
 City TAMPA State FL Zip Code 33634-2319
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COOL MASTER PRO LLC Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2020
Transaction ID : SA.1392501.1.1220
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

B. SUTTON, FRED, E., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address BOX 060250
 City PALM BAY State FL Zip Code 32906-0250
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUTTON PROPERTIES Occupation (for Individual) REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 09 / 2020
Transaction ID : SA.1378713.1.1220
 Amount of Each Receipt this Period 4800.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

C. SUTTON, MEREDITH, M., MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 718 HAWKSBILL ISLAND DR
 City SATELLITE BEACH State FL Zip Code 32937-3851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUTTON PROPERTIES Occupation (for Individual) HOMEMAKER/DEVELOPER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 09 / 2020
Transaction ID : SA.1378714.1.1220
 Amount of Each Receipt this Period 4800.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 14 OF 28
(check only one)

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

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)
Reclaim America PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WENGER, EDWARD, H., MR.,

Mailing Address 450 SE FIFTH AVENUE

City BOCA RATON	State FL	Zip Code 33432-5519
--------------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		01		2020

Transaction ID : SA.1332845.1.1220

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM RUBIO VICTORY

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	11642.71

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. HOLLER, DAN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3242 Amount of Each Disbursement this Period 1667.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. HOLLER, DAN, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3242 Amount of Each Disbursement this Period 183.05
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement OFFICE EQUIPMENT-SEE MEMO		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. B&H PHOTO-VIDEO.COM		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020
Mailing Address 420 9TH AVE		FEC Identification Number C [] Transaction ID : SB21B.I3242 Amount of Each Disbursement this Period 183.05
City NEW YORK	State NY	Zip Code 10001-1620
Purpose of Disbursement OFFICE EQUIPMENT		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1850.05
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)
Reclaim America PAC

A. HOLLER, DAN, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 12 / 31 / 2020

Mailing Address: C/O 228 S. WASHINGTON ST. STE. 115

City: ALEXANDRIA State: VA Zip Code: 22314

Purpose of Disbursement: STRATEGIC CONSULTING

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3242!

Amount of Each Disbursement this Period: 1667.00

Memo Item

B. HOWD, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 11 / 30 / 2020

Mailing Address: 1024 N. RANDOLPH ST.

City: ARLINGTON State: VA Zip Code: 22201

Purpose of Disbursement: ADMINISTRATIVE CONSULTING

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3242!

Amount of Each Disbursement this Period: 316.80

Memo Item

C. HOWD, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Date of Disbursement: 12 / 31 / 2020

Mailing Address: 1024 N. RANDOLPH ST.

City: ARLINGTON State: VA Zip Code: 22201

Purpose of Disbursement: ADMINISTRATIVE CONSULTING

Candidate Name:

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number: C

Transaction ID : SB21B.I3242!

Amount of Each Disbursement this Period: 316.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2300.60

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. IACOVELLA, NICK, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3244! Amount of Each Disbursement this Period [] 407.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. IACOVELLA, NICK, , ,		Date of Disbursement MM / DD / YYYY 12 / 31 / 2020
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3244! Amount of Each Disbursement this Period [] 407.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NEEDHAM, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3243 Amount of Each Disbursement this Period [] 2313.75
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement STRATEGIC CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

3127.75

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)
Reclaim America PAC

A. NEEDHAM, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement TRAVEL-SEE MEMO

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3243i

Amount of Each Disbursement this Period: 554.70

Memo Item

B. DELTA AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 1030 DELTA BLVD.

City ATLANTA State GA Zip Code 30354-1989

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3243i

Amount of Each Disbursement this Period: 554.70

Memo Item

C. NEEDHAM, MICHAEL, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3244

Amount of Each Disbursement this Period: 2313.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2868.45

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address P.O. BOX 84314

City
BATON ROUGE

State
LA

Zip Code
70884

Purpose of Disbursement
ONLINE PROCESSING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2020			

FEC Identification Number

C []

Transaction ID : SB21B.I3241f

Amount of Each Disbursement this Period

[] 180.90

Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T FINANCIAL SERVICES

Mailing Address P.O. BOX 24747

City
TAMPA

State
FL

Zip Code
33623-4747

Purpose of Disbursement
CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2020			

FEC Identification Number

C []

Transaction ID : SB21B.I3245f

Amount of Each Disbursement this Period

[] 877.21

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BOULEVARD
MD 5675

City
SAVANNAH

State
TX

Zip Code
94103

Purpose of Disbursement
TRAVEL CREDIT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			17			2020			

FEC Identification Number

C []

Transaction ID : SB21B.I3245f

Amount of Each Disbursement this Period

[] - 6154.70

Memo Item

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

[] 1058.11

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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020	
Mailing Address 1030 DELTA BLVD.		FEC Identification Number C [REDACTED]	
City ATLANTA	State GA	Zip Code 30354-1989	Transaction ID : SB21B.I3245!
Purpose of Disbursement TRAVEL		Category/ Type	Amount of Each Disbursement this Period 1958.38
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. HILTON		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020	
Mailing Address 9515 HOTEL DR		FEC Identification Number C [REDACTED]	
City AUSTIN	State TX	Zip Code 78719	Transaction ID : SB21B.I3245!
Purpose of Disbursement TRAVEL		Category/ Type	Amount of Each Disbursement this Period 275.98
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. UBER		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020	
Mailing Address 2100 M STREET NW UNIT 101		FEC Identification Number C [REDACTED]	
City WASHINGTON	State DC	Zip Code 94103	Transaction ID : SB21B.I3245!
Purpose of Disbursement TRAVEL		Category/ Type	Amount of Each Disbursement this Period 174.68
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. UNITED AIRWAYS		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020
Mailing Address 77 W WACKER DR		FEC Identification Number C [REDACTED]
City CHICAGO	State IL	Zip Code 60601-1604
Purpose of Disbursement TRAVEL	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period 4315.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement MM / DD / YYYY 12 / 31 / 2020
Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400		FEC Identification Number C [REDACTED]
City TYSONS CORNER	State VA	Zip Code 22182-2245
Purpose of Disbursement DATA MANAGEMENT	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period 288.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC		Date of Disbursement MM / DD / YYYY 12 / 31 / 2020
Mailing Address 15405 JOHN MARSHALL HWY		FEC Identification Number C [REDACTED]
City HAYMARKET	State VA	Zip Code 20169
Purpose of Disbursement LEGAL FEES	Category/Type [REDACTED]	
Candidate Name	Amount of Each Disbursement this Period 5000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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

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

5288.85
[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. HUCKABY DAVIS LISKER INC.

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST, STE. 115
SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3243I

Amount of Each Disbursement this Period: 2498.58

Memo Item

B. RED RIVER CO. LLC

Full Name (Last, First, Middle Initial)

Mailing Address C/O MSWANIGER BUSINESS SERVICES85

City CHESAPEAKE BEACH State MD Zip Code 20732

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3244I

Amount of Each Disbursement this Period: 24313.14

Memo Item

C. SOCKO STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4323 CATHEDRAL AVE., NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B.I3245I

Amount of Each Disbursement this Period: 6668.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	33479.72
TOTAL This Period (last page this line number only).....▶	49973.53

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. BOOZMAN FOR ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 14 / 2020	
Mailing Address PO BOX 671				
City ROGERS		State AR	Zip Code 72757	
Purpose of Disbursement CONTRIBUTION			<input type="checkbox"/>	
Candidate Name BOOZMAN, SEN., JOHN, ,			Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AR District:		Amount of Each Disbursement this Period 5000.00		
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) B. BOOZMAN FOR ARKANSAS			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 14 / 2020	
Mailing Address PO BOX 671				
City ROGERS		State AR	Zip Code 72757	
Purpose of Disbursement CONTRIBUTION			<input type="checkbox"/>	
Candidate Name BOOZMAN, SEN., JOHN, ,			Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: AR District:		Amount of Each Disbursement this Period 5000.00		
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) C. FAMILIES FOR JAMES LANKFORD			Date of Disbursement M M / D D / Y Y Y Y Y 12 / 14 / 2020	
Mailing Address 16121 WINDRUSH PL				
City EDMOND		State OK	Zip Code 73013	
Purpose of Disbursement CONTRIBUTION			<input type="checkbox"/>	
Candidate Name LANKFORD, JAMES , PAUL , , MR.			Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OK District: 05		Amount of Each Disbursement this Period 5000.00		
<input type="checkbox"/> Memo Item				

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. FAMILIES FOR JAMES LANKFORD		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address 16121 WINDRUSH PL		FEC Identification Number C00466482 Transaction ID : SB23.I32428
City EDMOND	State OK	Zip Code 73013
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name LANKFORD, JAMES , PAUL , , MR.		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN THUNE		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address 1911 W 57TH ST STE 102		FEC Identification Number C00409581 Transaction ID : SB23.I32429
City SIOUX FALL	State SD	Zip Code 57108
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name THUNE, JOHN, , ,		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SD	District:	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOHN THUNE		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address 1911 W 57TH ST STE 102		FEC Identification Number C00409581 Transaction ID : SB23.I32430
City SIOUX FALL	State SD	Zip Code 57108
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name THUNE, JOHN, , ,		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District:	<input type="checkbox"/> Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. FRIENDS OF ROY BLUNT

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement CONTRIBUTION

Candidate Name
BLUNT, ROY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MO District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2020

FEC Identification Number

C C00304758

Transaction ID : SB23.I32431

Amount of Each Disbursement this Period

5000.00

Memo Item

B. FRIENDS OF ROY BLUNT

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10178

City COLUMBIA State MO Zip Code 65205

Purpose of Disbursement CONTRIBUTION

Candidate Name
BLUNT, ROY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: MO District:

Date of Disbursement

MM / DD / YYYY
12 / 14 / 2020

FEC Identification Number

C C00304758

Transaction ID : SB23.I32432

Amount of Each Disbursement this Period

5000.00

Memo Item

C. FRIENDS OF TODD YOUNG, INC.

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 3743

City CARMEL State IN Zip Code 46082

Purpose of Disbursement CONTRIBUTION

Candidate Name
YOUNG, TODD, CHRISTOPHER, ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IN District:

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2020

FEC Identification Number

C C00459255

Transaction ID : SB23.I32433

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. FRIENDS OF TODD YOUNG, INC.

Date of Disbursement: / /

Mailing Address: PO BOX 3743

City: CARMEL State: IN Zip Code: 46082

Purpose of Disbursement: CONTRIBUTION

Candidate Name: YOUNG, TODD, CHRISTOPHER, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: IN District:

FEC Identification Number: **C00459255**
Transaction ID : **SB23.I32434**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. MIKE CRAPO FOR US SENATE

Date of Disbursement: / /

Mailing Address: PO BOX 1948

City: BOISE State: ID Zip Code: 83701

Purpose of Disbursement: CONTRIBUTION

Candidate Name: CRAPO, MICHAEL, D, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: ID District:

FEC Identification Number: **C00330886**
Transaction ID : **SB23.I32441**
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. MIKE CRAPO FOR US SENATE

Date of Disbursement: / /

Mailing Address: PO BOX 1948

City: BOISE State: ID Zip Code: 83701

Purpose of Disbursement: CONTRIBUTION

Candidate Name: CRAPO, MICHAEL, D, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: ID District:

FEC Identification Number: **C00330886**
Transaction ID : **SB23.I32442**
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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. MORAN FOR KANSAS		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address PO BOX 1151		FEC Identification Number C00458315 Transaction ID : SB23.I32443
City HAYS	State KS	Zip Code 67601-1151
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name MORAN, JERRY, , ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS	District:	

Full Name (Last, First, Middle Initial) B. MORAN FOR KANSAS		Date of Disbursement MM / DD / YYYY 12 / 14 / 2020
Mailing Address PO BOX 1151		FEC Identification Number C00458315 Transaction ID : SB23.I32444
City HAYS	State KS	Zip Code 67601-1151
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name MORAN, JERRY, , ,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KS	District:	

Full Name (Last, First, Middle Initial) C. PORTMAN FOR SENATE COMMITTEE		Date of Disbursement MM / DD / YYYY 12 / 21 / 2020
Mailing Address 9856 ARCHER LANE		FEC Identification Number C00458463 Transaction ID : SB23.I32447
City DUBLIN	State OH	Zip Code 43017-8914
Purpose of Disbursement CONTRIBUTION		Category/Type
Candidate Name PORTMAN, ROB, THE, HONORA,		Amount of Each Disbursement this Period 5000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District:	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Reclaim America PAC

A. PORTMAN FOR SENATE COMMITTEE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9856 ARCHER LANE

M M M	/	D D D	/	Y Y Y Y Y Y
12		21		2020

City DUBLIN State OH Zip Code 43017-8914

FEC Identification Number

Purpose of Disbursement
CONTRIBUTION

C	C00458463
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Candidate Name
PORTMAN, ROB, THE, HONORA,

Category/
Type

Transaction ID : SB23.I32448

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: OH District:

5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

--

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

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

City State Zip Code

FEC Identification Number

Purpose of Disbursement

C	
---	--

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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

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Memo Item

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

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

5000.00

80000.00
