

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 ▲

C C00566174 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- General (12G)
- Runoff (12R)
- Convention (12C)
- Special (12S)

Election on / / in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on / / in the State of

5. Covering Period / / 2018 through / / 2018

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

Signature of Treasurer MACKENZIE, SCOTT B, , , [Electronically Filed] Date / / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

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.....	70845.66	
(c) Total Receipts (from Line 19)	179434.86	324913.39
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	250280.52	406051.17
7. Total Disbursements (from Line 31).....	179950.50	335721.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	70330.02	70330.02
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)	1835.84	

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)

Page 3

Write or Type Committee Name

TEA PARTY MAJORITY FUND

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	28650.00	44900.00
(ii) Unitemized	150784.86	280013.39
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	179434.86	324913.39
(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)	179434.86	324913.39
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)).....▶	179434.86	324913.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	179434.86	324913.39

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	54362.03	86853.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	54362.03	86853.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	118388.47	224611.20
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	1200.00	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)).....	1200.00	1350.00
29. Other Disbursements (Including Non-Federal Donations).....	1000.00	17906.36
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)) ..	179950.50	335721.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	179950.50	335721.15

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)	179434.86	324913.39
34. Total Contribution Refunds (from Line 28(d))	1200.00	1350.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	178234.86	323563.39
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	54362.03	86853.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	54362.03	86853.59

**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 82
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ALFANO 105, ANNA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2018
Transaction ID : SA11AI.10592

Amount of Each Receipt this Period
150.00

Memo Item

B. ALFANO 105, ANNA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 MOSEMAN AVE

City KATONAH	State NY	Zip Code 10536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEMENS HEALTHCARE	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 22 / 2018
Transaction ID : SA11AI.10591

Amount of Each Receipt this Period
100.00

Memo Item

C. ALFANO 105, ANNA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 73 MOSEMAN AVE

City KATONAH	State NY	Zip Code 10536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEMENS HEALTHCARE	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
735.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2018
Transaction ID : SA11AI.10593

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	285.00
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 82
	(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. ARLOTTA 125, LYNETTE, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 50 OLD TOWN RD

City PINE BUSH	State NY	Zip Code 12566
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2018
Transaction ID : SA11AI.10686

Amount of Each Receipt this Period
150.00

Memo Item

B. ART 221, RAYMOND J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7832 GODOLPHIN DR

City SPRINGFIELD	State VA	Zip Code 22153
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 ▼ 310.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2018
Transaction ID : SA11AI.10709

Amount of Each Receipt this Period
105.00

Memo Item

C. BABLO 945, ADELBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 506 MARINA BLVD

City SUISUN CITY	State CA	Zip Code 94585
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 ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2018
Transaction ID : SA11AI.10749

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 82
	(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. BERRY 112, YVONNE R, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1019 VAN SICLEN AVE
APT 5J

City BROOKLYN State NY Zip Code 11207

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
MM / DD / YYYY
05 / 25 / 2018

Transaction ID : SA11AI.10926

Amount of Each Receipt this Period
100.00

Memo Item

B. BICE 575, DONALD L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 31629 277TH ST

City WINNER State SD Zip Code 57580

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

Name of Employer (for Individual) ROOTS AERIAL CROP SPRAYING SRV Occupation (for Individual) VICE PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2018

Transaction ID : SA11AI.10956

Amount of Each Receipt this Period
300.00

Memo Item

C. BITZER 456, ROSEMARY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 213 WENDY LN

City WAVERLY State OH Zip Code 45690

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
MM / DD / YYYY
04 / 23 / 2018

Transaction ID : SA11AI.10978

Amount of Each Receipt this Period
150.00

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 9 OF 82
<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. BOATSWAIN 112, VALARIE J, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1020 SCHENCK AVE

City BROOKLYN	State NY	Zip Code 11207
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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
05		07		2018

Transaction ID : SA11AI.11012

Amount of Each Receipt this Period
100.00

Memo Item

B. BODE 902, WILLIAM A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 PORTUGUESE BEND RD

City ROLLING HILLS	State CA	Zip Code 90274
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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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		25		2018

Transaction ID : SA11AI.11017

Amount of Each Receipt this Period
250.00

Memo Item

C. BOONE 372, JOHN L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 BURTON HILLS BLVD APT S253

City NASHVILLE	State TN	Zip Code 37215
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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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		24		2018

Transaction ID : SA11AI.11038

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 82
	<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. BOOTH 211, SARAH, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 104 CARROLL VIEW AVE

City WESTMINSTER	State MD	Zip Code 21157
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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 ▼
275.00

Date of Receipt

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

Transaction ID : SA11AI.11043

Amount of Each Receipt this Period
100.00

Memo Item

B. 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
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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 ▼
250.00

Date of Receipt

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

Transaction ID : SA11AI.11163

Amount of Each Receipt this Period
200.00

Memo Item

C. BRUECKNER 377, MYNHART, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 333 W HUNT RD

City ALCOA	State TN	Zip Code 37701
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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
06		07		2018

Transaction ID : SA11AI.11236

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 11 OF 82
(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. BUCHHOLZ 577, MARY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16249 MDU LOOP

City BELLE FOURCHE	State SD	Zip Code 57717
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CTR OF THE NATION WOOL INC	Occupation (for Individual) DIRECTOR
---	---

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
 05 / 24 / 2018
Transaction ID : SA11AI.11254

Amount of Each Receipt this Period
 300.00

Memo Item

B. CALDWELL 041, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PRIMARY LN

City FALMOUTH	State ME	Zip Code 04105
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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 ▼
205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2018
Transaction ID : SA11AI.11379

Amount of Each Receipt this Period
 105.00

Memo Item

C. CALDWELL 041, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 PRIMARY LN

City FALMOUTH	State ME	Zip Code 04105
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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 ▼
305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2018
Transaction ID : SA11AI.11378

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	505.00
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 12 OF 82
<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. CHARLEBOIS 347, EDWARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20639 PRINCE RANIER PL

City LEESBURG	State FL	Zip Code 34748
------------------	-------------	-------------------

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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2018

Transaction ID : SA11AI.11505

Amount of Each Receipt this Period

- 50.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 3/21/2018

B. CHARLEBOIS 347, EDWARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20639 PRINCE RANIER PL

City LEESBURG	State FL	Zip Code 34748
------------------	-------------	-------------------

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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2018

Transaction ID : SA11AI.16989

Amount of Each Receipt this Period

50.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

C. CHARLEBOIS 347, EDWARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20639 PRINCE RANIER PL

City LEESBURG	State FL	Zip Code 34748
------------------	-------------	-------------------

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 ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		21		2018

Transaction ID : SA11AI.11504

Amount of Each Receipt this Period

50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
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 13 OF 82
(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. CHILSON 017, KENDALL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 FREEDOM ST
 City HOPEDALE State MA Zip Code 01747
 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 06 / 21 / 2018
Transaction ID : SA11AI.11524
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CLARK 481, THOMAS, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 S WAGNER RD UNIT 83
 City ANN ARBOR State MI Zip Code 48103
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) XPO LOGISTICS Occupation (for Individual) SR VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 05 / 04 / 2018
Transaction ID : SA11AI.11566
 Amount of Each Receipt this Period 350.00
 Memo Item

C. CLEMMONS 775, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4601 HAMBLEN CT
 City SEABROOK State TX Zip Code 77586
 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 05 / 17 / 2018
Transaction ID : SA11AI.11588
 Amount of Each Receipt this Period 250.00
 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 14 OF 82
<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. COLLINS 975, IDELLE, , MS,
Mailing Address PO BOX 849

City SHADY COVE	State OR	Zip Code 97539
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 ▼ 500.00

Date of Receipt
06 / 27 / 2018
Transaction ID : SA11AI.11650

Amount of Each Receipt this Period
500.00

Memo Item

B. COLTRANE 177, LORETTA E, , MRS,
Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
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 ▼ 235.00

Date of Receipt
05 / 23 / 2018
Transaction ID : SA11AI.11656

Amount of Each Receipt this Period
50.00

Memo Item

C. CONNOLLY 333, DOROTHY, , MS,
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
06 / 11 / 2018
Transaction ID : SA11AI.11670

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 15 OF 82
(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. 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 ▼ 1100.00

Date of Receipt 04 / 24 / 2018
Transaction ID : SA11AI.11692
 Amount of Each Receipt this Period 500.00
 Memo Item

B. 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 ▼ 1200.00

Date of Receipt 05 / 14 / 2018
Transaction ID : SA11AI.11691
 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 ▼ 1700.00

Date of Receipt 06 / 21 / 2018
Transaction ID : SA11AI.11693
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 1100.00
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 82
	<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
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
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2018
Transaction ID : SA11AI.11705

Amount of Each Receipt this Period
 100.00

Memo Item

B. 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2018
Transaction ID : SA11AI.11712

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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2018
Transaction ID : SA11AI.11713

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 17 OF 82
<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. COX 600, MARJORIE, , MS,
Mailing Address 3132 COUNTRY LN

City WILMETTE	State IL	Zip Code 60091
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
06 / 14 / 2018
Transaction ID : SA11AI.11734

Amount of Each Receipt this Period
100.00

Memo Item

B. CRAIG 481, ERNA, , MRS,
Mailing Address 7330 N WILDWOOD ST

City WESTLAND	State MI	Zip Code 48185
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 ▼ 205.00

Date of Receipt
04 / 11 / 2018
Transaction ID : SA11AI.11748

Amount of Each Receipt this Period
205.00

Memo Item

C. DALY 379, CHAD, , MR,
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
05 / 09 / 2018
Transaction ID : SA11AI.11830

Amount of Each Receipt this Period
100.00

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 18 OF 82
<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. 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 ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		23		2018

Transaction ID : SA11AI.11841

Amount of Each Receipt this Period
100.00

Memo Item

B. DAVIES 208, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10109 SORREL AVE

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 ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2018

Transaction ID : SA11AI.11871

Amount of Each Receipt this Period
- 100.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 3/08/2018

C. DAVIES 208, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10109 SORREL AVE

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 ▼
100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		09		2018

Transaction ID : SA11AI.16990

Amount of Each Receipt this Period
100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

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: PAGE 19 OF 82
(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. DEININGER 926, MARY ELIZABETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 RUE GRAND DUCAL
 City NEWPORT BEACH State CA Zip Code 92660
 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 04 / 18 / 2018
Transaction ID : SA11AI.11938
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DUIN 562, DUANE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7682 COUNTY ROAD 2
 City DUMONT State MN Zip Code 56236
 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 06 / 11 / 2018
Transaction ID : SA11AI.12082
 Amount of Each Receipt this Period 200.00
 Memo Item

C. 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
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 28 / 2018
Transaction ID : SA11AI.12159
 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 20 OF 82
<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. EVANS 660, JAMES PRESTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 CLINTON PKWY

City LAWRENCE	State KS	Zip Code 66047
------------------	-------------	-------------------

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
05		04		2018

Transaction ID : SA11AI.12268

Amount of Each Receipt this Period
200.00

Memo Item

B. EVANS 660, JAMES PRESTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 CLINTON PKWY

City LAWRENCE	State KS	Zip Code 66047
------------------	-------------	-------------------

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 ▼
650.00

Date of Receipt

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

Transaction ID : SA11AI.12269

Amount of Each Receipt this Period
250.00

Memo Item

C. EVERETT 826, MARGOT M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5420 S OAK ST

City CASPER	State WY	Zip Code 82601
----------------	-------------	-------------------

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
06		14		2018

Transaction ID : SA11AI.12276

Amount of Each Receipt this Period
75.00

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 21 OF 82
	<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. FAETH 488, PAUL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4525 HAMPTON CT APT 4

City GRAND LEDGE	State MI	Zip Code 48837
---------------------	-------------	-------------------

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 ▼
410.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		18		2018

Transaction ID : SA11AI.12285

Amount of Each Receipt this Period
205.00

Memo Item

B. 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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2018

Transaction ID : SA11AI.12335

Amount of Each Receipt this Period
100.00

Memo Item

C. FINCH 373, MAX C, , DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5521 MILL STONE DR

City OOLTEWAH	State TN	Zip Code 37363
------------------	-------------	-------------------

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

Name of Employer (for Individual) TEAM HEALTH	Occupation (for Individual) DOCTOR
--	---------------------------------------

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
06		13		2018

Transaction ID : SA11AI.12358

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	555.00
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 82
	<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. FLAHERTY 941, DENNIS L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 MINNA ST
 APT 38C
 City SAN FRANCISCO State CA Zip Code 94105
 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
 05 / 28 / 2018
Transaction ID : SA11AI.12376
 Amount of Each Receipt this Period
 300.00
 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2018
Transaction ID : SA11AI.12382
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. FRUCHTNIH 704, DONALD J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 618 BEAU CHENE DR
 City MANDEVILLE State LA Zip Code 70471
 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
 04 / 02 / 2018
Transaction ID : SA11AI.12495
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 23 OF 82
	(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. FRUCHTNIKT 704, DONALD J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 618 BEAU CHENE DR

City MANDEVILLE	State LA	Zip Code 70471
--------------------	-------------	-------------------

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
06		08		2018

Transaction ID : SA11AI.12494

Amount of Each Receipt this Period
200.00

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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2018

Transaction ID : SA11AI.12545

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 ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2018

Transaction ID : SA11AI.12581

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 24 OF 82
	<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. GIDDENS 328, BYRON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 RIVERS CT

City ORLANDO	State FL	Zip Code 32828
-----------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2018

Transaction ID : SA11AI.12628

Amount of Each Receipt this Period
300.00

Memo Item

B. GIRRBACH 492, KRISTA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14615 AYRES HWY

City TIPTON	State MI	Zip Code 49287
----------------	-------------	-------------------

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

Name of Employer (for Individual) MORGAN STANLEY	Occupation (for Individual) FINANCIAL ADVISOR
---	--

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
04		11		2018

Transaction ID : SA11AI.12654

Amount of Each Receipt this Period
250.00

Memo Item

C. GRIMESTAD 586, WAYNE L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2575 STATES BLVD

City DICKINSON	State ND	Zip Code 58601
-------------------	-------------	-------------------

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

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

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
04		17		2018

Transaction ID : SA11AI.12788

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 82
<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. GROSSO 088, NANCY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 236 LONG HILL RD

City HILLSBOROUGH	State NJ	Zip Code 08844
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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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2018

Transaction ID : SA11AI.12796

Amount of Each Receipt this Period
200.00

Memo Item

B. HADLEY 435, SUSAN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7150 OAK HILL DR

City SYLVANIA	State OH	Zip Code 43560
------------------	-------------	-------------------

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

Name of Employer (for Individual) OSU DEPT OF DANCE	Occupation (for Individual) PROFESSOR
--	--

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
05	/	01	/	2018

Transaction ID : SA11AI.12834

Amount of Each Receipt this Period
105.00

Memo Item

C. HARING 448, ANGELINE J, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 825 ALEXANDER RD W

City BELLVILLE	State OH	Zip Code 44813
-------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	13	/	2018

Transaction ID : SA11AI.12904

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	455.00
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 26 OF 82
(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. HARING 448, ANGELINE J, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 825 ALEXANDER RD W
 City BELLVILLE State OH Zip Code 44813
 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 ▼ 450.00

Date of Receipt 06 / 11 / 2018
Transaction ID : SA11AI.12905
 Amount of Each Receipt this Period 150.00
 Memo Item

B. 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 ▼ 250.00

Date of Receipt 05 / 16 / 2018
Transaction ID : SA11AI.13174
 Amount of Each Receipt this Period 250.00
 Memo Item

C. HOPKINS 230, TIMOTHY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3205 HADENSVILLE FIFE RD
 City GOOCHLAND State VA Zip Code 23063
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RAS WELDING Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 22 / 2018
Transaction ID : SA11AI.13189
 Amount of Each Receipt this Period 300.00
 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:	PAGE 27 OF 82
	(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. HUGHES 600, WILLIAM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1510 S RIVER RD

City LIBERTYVILLE	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer (for Individual) ALLIANCE RACING	Occupation (for Individual) MANAGER
--	--

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
05		17		2018

Transaction ID : SA11AI.13262

Amount of Each Receipt this Period
250.00

Memo Item

B. JANZEN 970, PAMELA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 160

City SANDY	State OR	Zip Code 97055
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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 ▼
205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2018

Transaction ID : SA11AI.13397

Amount of Each Receipt this Period
205.00

Memo Item

C. JANZEN 970, PAMELA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 160

City SANDY	State OR	Zip Code 97055
---------------	-------------	-------------------

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 ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2018

Transaction ID : SA11AI.13396

Amount of Each Receipt this Period
305.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	760.00
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 82
	(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. JOHNSON 334, PATSY S, , MS,
Mailing Address 751 ISLAND DR

City PALM BEACH	State FL	Zip Code 33480
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 ▼ 1300.00

Date of Receipt
04 / 16 / 2018
Transaction ID : SA11AI.13450

Amount of Each Receipt this Period
500.00

Memo Item

B. JOHNSON 334, PATSY S, , MS,
Mailing Address 751 ISLAND DR

City PALM BEACH	State FL	Zip Code 33480
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 ▼ 1600.00

Date of Receipt
04 / 20 / 2018
Transaction ID : SA11AI.13449

Amount of Each Receipt this Period
300.00

Memo Item

C. JONES 432, JOHN R, , MR,
Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JONES BUELL COMPANY		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
04 / 18 / 2018
Transaction ID : SA11AI.13492

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 29 OF 82
(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. JONES 432, JOHN R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 FRANK RD
 City COLUMBUS State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONES BUELL COMPANY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 04 / 2018
Transaction ID : SA11AI.13491
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JONES 432, JOHN R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 FRANK RD
 City COLUMBUS State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONES BUELL COMPANY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 18 / 2018
Transaction ID : SA11AI.13490
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KELTNER 740, DARRELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2701 CLAREMONT DR
 City BARTLESVILLE State OK Zip Code 74006
 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 05 / 23 / 2018
Transaction ID : SA11AI.13576
 Amount of Each Receipt this Period 250.00
 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 30 OF 82
<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. KISSEL 074, THEODORE S, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 59 BERKSHIRE PL

City ALLENDALE	State NJ	Zip Code 07401
-------------------	-------------	-------------------

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

Transaction ID : SA11AI.13633

Amount of Each Receipt this Period
50.00

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2018

Transaction ID : SA11AI.13712

Amount of Each Receipt this Period
100.00

Memo Item

C. KUNZ 827, PAUL G, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 282

City MOORCROFT	State WY	Zip Code 82721
-------------------	-------------	-------------------

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

Name of Employer (for Individual) 88 OIL	Occupation (for Individual) FIELD REPRESENTATIVE
---	---

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
05	/	21	/	2018

Transaction ID : SA11AI.13730

Amount of Each Receipt this Period
300.00

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 31 OF 82
	<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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2018

Transaction ID : SA11AI.13731

Amount of Each Receipt this Period
250.00

Memo Item

B. LANE 740, JOE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City CHELSEA	State OK	Zip Code 74016
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2018

Transaction ID : SA11AI.13779

Amount of Each Receipt this Period
505.00

Memo Item

C. LANE 740, JOE C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City CHELSEA	State OK	Zip Code 74016
-----------------	-------------	-------------------

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
05		10		2018

Transaction ID : SA11AI.13781

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1055.00
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 82
	<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. LAWRENCE 671, ANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2585 162ND RD

City OXFORD	State KS	Zip Code 67119
----------------	-------------	-------------------

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

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

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
05		23		2018

Transaction ID : SA11AI.13814

Amount of Each Receipt this Period
250.00

Memo Item

B. LEONARD 162, ROBERT E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 118 OAKWOOD LN

City SHIPPENVILLE	State PA	Zip Code 16254
----------------------	-------------	-------------------

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
05		10		2018

Transaction ID : SA11AI.13858

Amount of Each Receipt this Period
200.00

Memo Item

C. LESSIG 212, RICHARD B, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 ADMIRAL BLVD

City BALTIMORE	State MD	Zip Code 21222
-------------------	-------------	-------------------

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
05		07		2018

Transaction ID : SA11AI.13863

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 33 OF 82
	<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. LESSIG 212, RICHARD B, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 ADMIRAL BLVD

City BALTIMORE	State MD	Zip Code 21222
-------------------	-------------	-------------------

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
06		11		2018

Transaction ID : SA11AI.13864

Amount of Each Receipt this Period
300.00

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 ▼
260.00

Date of Receipt

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

Transaction ID : SA11AI.14041

Amount of Each Receipt this Period
60.00

Memo Item

C. 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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		28		2018

Transaction ID : SA11AI.14087

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	460.00
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 34 OF 82
(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. 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 ▼ 250.00

Date of Receipt 05 / 25 / 2018
Transaction ID : SA11AI.14366
 Amount of Each Receipt this Period 50.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt 05 / 04 / 2018
Transaction ID : SA11AI.14437
 Amount of Each Receipt this Period 300.00
 Memo Item

C. MOFFITT 273, TERRY W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6573 BUFFALO FORD RD
 City RAMSEUR State NC Zip Code 27316
 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 06 / 08 / 2018
Transaction ID : SA11AI.14467
 Amount of Each Receipt this Period 200.00
 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:	PAGE 35 OF 82
	(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. MOONEY 158, JOE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1008 WATER ST

City BROCKWAY	State PA	Zip Code 15824
------------------	-------------	-------------------

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
05		23		2018

Transaction ID : SA11AI.14489

Amount of Each Receipt this Period
200.00

Memo Item

B. NOLD 674, RONALD J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2191 EDEN RD
LOT 11

City ABILENE	State KS	Zip Code 67410
-----------------	-------------	-------------------

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
05		09		2018

Transaction ID : SA11AI.14722

Amount of Each Receipt this Period
250.00

Memo Item

C. NOWELL 018, WINFORD T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 ROLLINS ST

City GROVELAND	State MA	Zip Code 01834
-------------------	-------------	-------------------

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
06		25		2018

Transaction ID : SA11AI.14744

Amount of Each Receipt this Period
200.00

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 36 OF 82
	<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. NOZNISKY 142, SARAH A, , MS,
 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 ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2018
Transaction ID : SA11AI.14746

Amount of Each Receipt this Period
 100.00

Memo Item

B. PFEIL 052, KARL, , MR,
 Mailing Address 2121 NORTH RD

City ARLINGTON	State VT	Zip Code 05250
-------------------	-------------	-------------------

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 M / D D D / Y Y Y Y Y Y
 05 / 16 / 2018
Transaction ID : SA11AI.14973

Amount of Each Receipt this Period
 105.00

Memo Item

C. PINKERTON 456, GLEN, , MR,
 Mailing Address 759 ALMA OMEGA RD

City WAVERLY	State OH	Zip Code 45690
-----------------	-------------	-------------------

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

Name of Employer (for Individual) MEAD PAPER CO	Occupation (for Individual) TRUCK DRIVER
--	---

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
 06 / 25 / 2018
Transaction ID : SA11AI.15002

Amount of Each Receipt this Period
 105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 37 OF 82
	(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. 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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		08		2018

Transaction ID : SA11AI.15009

Amount of Each Receipt this Period
100.00

Memo Item

B. 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 ▼
250.00

Date of Receipt

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

Transaction ID : SA11AI.15024

Amount of Each Receipt this Period
100.00

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		01		2018

Transaction ID : SA11AI.15128

Amount of Each Receipt this Period
200.00

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 38 OF 82
	<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 ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		04		2018

Transaction ID : SA11AI.15129

Amount of Each Receipt this Period
200.00

Memo Item

B. READ 805, SCOTT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4660 CHAPMAN RD

City JOHNSTOWN	State CO	Zip Code 80534
-------------------	-------------	-------------------

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
05		17		2018

Transaction ID : SA11AI.15222

Amount of Each Receipt this Period
350.00

Memo Item

C. ROGERS 365, JOAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 SPANISH FORT BLVD
APT 55

City SPANISH FORT	State AL	Zip Code 36527
----------------------	-------------	-------------------

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
05		03		2018

Transaction ID : SA11AI.15399

Amount of Each Receipt this Period
175.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	725.00
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 39 OF 82
	(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. ROGERS 783, JANET, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 603 E 11TH ST

City BISHOP	State TX	Zip Code 78343
----------------	-------------	-------------------

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 M	/	D D D	/	Y Y Y Y Y Y
05		08		2018

Transaction ID : SA11AI.15404

Amount of Each Receipt this Period
100.00

Memo Item

B. ROGERS 783, JANET, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 603 E 11TH ST

City BISHOP	State TX	Zip Code 78343
----------------	-------------	-------------------

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 M	/	D D D	/	Y Y Y Y Y Y
06		20		2018

Transaction ID : SA11AI.15403

Amount of Each Receipt this Period
105.00

Memo Item

C. ROSS 372, DORIS B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 MYHR GRN

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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
05		23		2018

Transaction ID : SA11AI.15435

Amount of Each Receipt this Period
- 25.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 10/30/2017

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 40 OF 82
<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. ROSS 372, DORIS B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 MYHR GRN

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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 ▼
25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2018

Transaction ID : SA11AI.16991

Amount of Each Receipt this Period
25.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

B. ROSS 372, DORIS B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 MYHR GRN

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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
06		28		2018

Transaction ID : SA11AI.15436

Amount of Each Receipt this Period
- 25.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 1/29/2018

C. ROSS 372, DORIS B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 209 MYHR GRN

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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 ▼
25.00

Date of Receipt

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

Transaction ID : SA11AI.16992

Amount of Each Receipt this Period
25.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

SUBTOTAL of Receipts This Page (optional).....	25.00
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 82
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ROSS 993, WALTER D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 327
 City BEVERLY State WA Zip Code 99321
 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 05 / 17 / 2018
Transaction ID : SA11AI.15441
 Amount of Each Receipt this Period 105.00
 Memo Item

B. ROTHWELL 085, TIMOTHY G, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 207 SANDY RIDGE MOUNT AIRY RD
 City STOCKTON State NJ Zip Code 08559
 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 ▼ 500.00

Date of Receipt 05 / 09 / 2018
Transaction ID : SA11AI.15452
 Amount of Each Receipt this Period 500.00
 Memo Item

C. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ 200.00

Date of Receipt 04 / 19 / 2018
Transaction ID : SA11AI.15481
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	705.00
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 82
	<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. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ 100.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.15472
 Amount of Each Receipt this Period - 100.00
 Memo Item
 REVERSAL OF CC CONTRIBUTION OF 1/19/2017

B. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.15474
 Amount of Each Receipt this Period - 100.00
 Memo Item
 REVERSAL OF CC CONTRIBUTION OF 4/19/2017

C. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ 100.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.16993
 Amount of Each Receipt this Period 100.00
 Memo Item
 CREDIT REVERSED AND REFUNDED LN 28a

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 43 OF 82
	<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. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ 200.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.16994
 Amount of Each Receipt this Period 100.00
 Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

B. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ 100.00

Date of Receipt 06 / 11 / 2018
Transaction ID : SA11AI.15473
 Amount of Each Receipt this Period - 100.00
 Memo Item
REVERSAL OF CC CONTRIBUTION OF 7/19/2017

C. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼

Date of Receipt 06 / 11 / 2018
Transaction ID : SA11AI.15475
 Amount of Each Receipt this Period - 100.00
 Memo Item
REVERSAL OF CC CONTRIBUTION OF 10/19/2017

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:	PAGE 44 OF 82
	(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. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼
- 100.00

Date of Receipt

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

Transaction ID : SA11AI.15476

Amount of Each Receipt this Period
- 100.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 1/19/2018

B. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼
- 200.00

Date of Receipt

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

Transaction ID : SA11AI.15479

Amount of Each Receipt this Period
- 100.00

Memo Item
REVERSAL OF CC CONTRIBUTION OF 4/19/2018

C. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼
- 100.00

Date of Receipt

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

Transaction ID : SA11AI.16995

Amount of Each Receipt this Period
100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

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:	PAGE 45 OF 82
	(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. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼

Date of Receipt

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

Transaction ID : SA11AI.16996

Amount of Each Receipt this Period

100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

B. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼

Date of Receipt

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

Transaction ID : SA11AI.16997

Amount of Each Receipt this Period

100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

C. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼

Date of Receipt

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

Transaction ID : SA11AI.16998

Amount of Each Receipt this Period

100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

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 46 OF 82
	<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. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ - 100.00

Date of Receipt
 06 / 28 / 2018
Transaction ID : SA11AI.15477
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
 DUPLICATE: REVERSAL OF CC CONTRIBUTION OF 7/19/2017

B. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ - 200.00

Date of Receipt
 06 / 28 / 2018
Transaction ID : SA11AI.15478
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
 DUPLICATE: REVERSAL OF CC CONTRIBUTION OF 10/19/2017

C. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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
 06 / 28 / 2018
Transaction ID : SA11AI.15480
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
 DUPLICATE: REVERSAL OF CC CONTRIBUTION OF 1/19/2018

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 47 OF 82
	<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. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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
 06 / 28 / 2018
Transaction ID : SA11AI.15482
 Amount of Each Receipt this Period
 - 100.00
 Memo Item
 DUPLICATE: REVERSAL OF CC CONTRIBUTION OF 4/19/2018

B. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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
 06 / 28 / 2018
Transaction ID : SA11AI.16999
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CREDIT REVERSED AND REFUNDED LN 28a

C. ROY 985, ANN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 211 E PENZANCE RD
 City SHELTON State WA Zip Code 98584
 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 ▼ - 200.00

Date of Receipt
 06 / 28 / 2018
Transaction ID : SA11AI.17000
 Amount of Each Receipt this Period
 100.00
 Memo Item
 CREDIT REVERSED AND REFUNDED LN 28a

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 48 OF 82
	<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. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼
- 100.00

Date of Receipt

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

Transaction ID : SA11AI.17001

Amount of Each Receipt this Period
100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

B. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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 ▼

Date of Receipt

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

Transaction ID : SA11AI.17002

Amount of Each Receipt this Period
100.00

Memo Item
CREDIT REVERSED AND REFUNDED LN 28a

C. SAHLIYEH 752, SANDY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 PARLIAMENT PL

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		24		2018

Transaction ID : SA11AI.15528

Amount of Each Receipt this Period
250.00

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 49 OF 82
	<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. SCHATKO 480, JOANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 17810 24 MILE RD

City MACOMB	State MI	Zip Code 48042
----------------	-------------	-------------------

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
06	/	29	/	2018

Transaction ID : SA11AI.15582

Amount of Each Receipt this Period
250.00

Memo Item

B. SCHELLING 125, EDWARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1217 BURLINGHAM RD

City PINE BUSH	State NY	Zip Code 12566
-------------------	-------------	-------------------

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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	06	/	2018

Transaction ID : SA11AI.15586

Amount of Each Receipt this Period
250.00

Memo Item

C. SCHELLING 125, EDWARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1217 BURLINGHAM RD

City PINE BUSH	State NY	Zip Code 12566
-------------------	-------------	-------------------

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

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	24	/	2018

Transaction ID : SA11AI.15585

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 50 OF 82
	(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. SCUDERI 902, LEONARD, , DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3 GAUCHO DR

City ROLLING HILLS ESTA	State CA	Zip Code 90274
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) CARDIOLOGIST
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
05 / 14 / 2018
Transaction ID : SA11AI.15678

Amount of Each Receipt this Period
300.00

Memo Item

B. 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
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) RESTAURANT OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00

Date of Receipt
06 / 18 / 2018
Transaction ID : SA11AI.15725

Amount of Each Receipt this Period
100.00

Memo Item

C. SJOGREN 672, JOHN F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 335 N 127TH ST E

City WICHITA	State KS	Zip Code 67206
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
06 / 13 / 2018
Transaction ID : SA11AI.15818

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
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 51 OF 82
(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. SKOPP 068, MARY ANN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 38 JAY CIR
 City FAIRFIELD State CT Zip Code 06825
 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 06 / 08 / 2018
Transaction ID : SA11AI.15824
 Amount of Each Receipt this Period 105.00
 Memo Item

B. SMITH 532, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 E HAMPSHIRE ST
 City MILWAUKEE State WI Zip Code 53211
 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 05 / 07 / 2018
Transaction ID : SA11AI.15880
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SMITH 932, J M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17725 AVENUE 336
 City VISALIA State CA Zip Code 93292
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARMER Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 18 / 2018
Transaction ID : SA11AI.15905
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 555.00
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 82
	<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 ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		02		2018

Transaction ID : SA11AI.16064

Amount of Each Receipt this Period
175.00

Memo Item

B. STONE 881, DAVID L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 888

City PORTALES	State NM	Zip Code 88130
------------------	-------------	-------------------

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

Name of Employer (for Individual) JP STONE COMMUNITY BANK	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2018

Transaction ID : SA11AI.16069

Amount of Each Receipt this Period
1000.00

Memo Item

C. SUSONG 305, BEBEE, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 366 HOLLY CIR

City DAWSONVILLE	State GA	Zip Code 30534
---------------------	-------------	-------------------

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 ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2018

Transaction ID : SA11AI.16129

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 82
	<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. SUSONG 305, BEBEE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 HOLLY CIR
 City DAWSONVILLE State GA Zip Code 30534
 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 06 / 25 / 2018
Transaction ID : SA11AI.16130
 Amount of Each Receipt this Period 35.00
 Memo Item

B. TATE 379, JOE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1017 N CEDAR BLUFF RD
 City KNOXVILLE State TN Zip Code 37923
 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 05 / 08 / 2018
Transaction ID : SA11AI.16179
 Amount of Each Receipt this Period 105.00
 Memo Item

C. TIKKER 837, BOB, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 369 S WINTHROP PL
 City BOISE State ID Zip Code 83709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIKKER ENGINEERING Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 16 / 2018
Transaction ID : SA11AI.16289
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	390.00
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 82
	<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. TREDINICK 322, SUE B, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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: 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
 05 / 07 / 2018
Transaction ID : SA11AI.16324
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 16 / 2018
Transaction ID : SA11AI.16358
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. 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 ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2018
Transaction ID : SA11AI.16360
 Amount of Each Receipt this Period
 200.00
 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: PAGE 55 OF 82
(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. 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 ▼ 600.00

Date of Receipt 06 / 11 / 2018
Transaction ID : SA11AI.16359
 Amount of Each Receipt this Period 100.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt 04 / 19 / 2018
Transaction ID : SA11AI.16521
 Amount of Each Receipt this Period 150.00
 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 ▼ 500.00

Date of Receipt 05 / 25 / 2018
Transaction ID : SA11AI.16520
 Amount of Each Receipt this Period 200.00
 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 56 OF 82
<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. WALSH 074, FRANCIS J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 CHESTNUT RIDGE RD
 City SADDLE RIVER State NJ Zip Code 07458
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) NATIONAL RETAIL SYSTEMS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 05 / 29 / 2018
Transaction ID : SA11AI.16917
 Amount of Each Receipt this Period 3000.00
 Memo Item

B. WATERHOUSE 339, JOYCE R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14326 HARBOUR LANDINGS DR UNIT
 City FORT MYERS State FL Zip Code 33908
 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 05 / 25 / 2018
Transaction ID : SA11AI.16567
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WIGGINS 277, ELIZABETH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt 06 / 06 / 2018
Transaction ID : SA11AI.16696
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3125.00
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 57 OF 82
(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. 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 ▼ 600.00

Date of Receipt 05 / 15 / 2018
Transaction ID : SA11AI.16707
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WILLIAMS 665, CHRISTOPHER C, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2121 MEADOWLARK RD APT 224
 City MANHATTAN State KS Zip Code 66502
 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 04 / 23 / 2018
Transaction ID : SA11AI.16721
 Amount of Each Receipt this Period 250.00
 Memo Item

C. WOLHAUPTER 902, CHARLES K, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 425
 City MALIBU State CA Zip Code 90265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FISKE LEAPWOOD FLOWERS LLC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 09 / 2018
Transaction ID : SA11AI.16800
 Amount of Each Receipt this Period 150.00
 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 58 OF 82
(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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
YOUNG 640, VIRGINIA, , MS,
Mailing Address 629 NE LAKE POINTE DR
City LEES SUMMIT State MO Zip Code 64064
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FREELANCE WRITER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2018
Transaction ID : SA11AL16889
Amount of Each Receipt this Period
350.00
 Memo Item

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	350.00
TOTAL This Period (last page this line number only).....▶	28650.00

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

Full Name (Last, First, Middle Initial)

A. BAKER HOSTETLER LLP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2018

Mailing Address 1050 CONNECTICUT AVE NW

FEC Identification Number

C	C00566174
---	-----------

City WASHINGTON State DC Zip Code 20036

Transaction ID : SB21B.16920

Purpose of Disbursement
LEGAL SERVICES

001
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. BAKER HOSTETLER LLP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2018

Mailing Address 1050 CONNECTICUT AVE NW

FEC Identification Number

C	C00566174
---	-----------

City WASHINGTON State DC Zip Code 20036

Transaction ID : SB21B.16921

Purpose of Disbursement
LEGAL SERVICES

001
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. BAKER HOSTETLER LLP

Date of Disbursement

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

Mailing Address 1050 CONNECTICUT AVE NW

FEC Identification Number

C	C00566174
---	-----------

City WASHINGTON State DC Zip Code 20036

Transaction ID : SB21B.16922

Purpose of Disbursement
LEGAL SERVICES

001
Category/ Type

Amount of Each Disbursement this Period

2500.00

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

7500.00

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

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**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 M	/	D D D	/	Y Y Y Y Y
04		02		2018

Mailing Address 2353 TOWN CENTER DRIVE

FEC Identification Number

C C00566174

Transaction ID : SB21B.16923

Amount of Each Disbursement this Period

7.95

Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: AMEX COLLECTION FEE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		04		2018

Mailing Address 2353 TOWN CENTER DRIVE

FEC Identification Number

C C00566174

Transaction ID : SB21B.16926

Amount of Each Disbursement this Period

48.95

Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: MERCHANT SERVICES DISCOUNT FEE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		04		2018

Mailing Address 2353 TOWN CENTER DRIVE

FEC Identification Number

C C00566174

Transaction ID : SB21B.16925

Amount of Each Disbursement this Period

686.49

Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BANK FEE: INTERCHNG FEE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

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

743.39

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 SERVICES FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 04 / 04 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16932
Amount of Each Disbursement this Period: 453.56

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: AMEX DISCOUNT FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 04 / 05 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16935
Amount of Each Disbursement this Period: 91.04

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: USA ePAY FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 04 / 09 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16938
Amount of Each Disbursement this Period: 20.00

Memo Item

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

564.60

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)
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: 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: 04 / 18 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16941

Amount of Each Disbursement this Period: 212.12

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: AMEX COLLECTION FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 05 / 01 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16924

Amount of Each Disbursement this Period: 7.95

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: MERCHANT SERVICES DISCOUNT FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 05 / 04 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16927

Amount of Each Disbursement this Period: 48.43

Memo Item

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

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

268.50

**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 MM / DD / YYYY 05 / 04 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE			
City SUGARLAND	State TX	Zip Code 77478	
Purpose of Disbursement BANK FEE: INTERCHNG FEE		Category/ Type 001	FEC Identification Number C00566174 Transaction ID : SB21B.16930
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 732.80	
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. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 05 / 04 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE			
City SUGARLAND	State TX	Zip Code 77478	
Purpose of Disbursement BANK FEE: MERCHANT SERVICES FEE		Category/ Type 001	FEC Identification Number C00566174 Transaction ID : SB21B.16930
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 396.28	
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. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 05 / 07 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE			
City SUGARLAND	State TX	Zip Code 77478	
Purpose of Disbursement BANK FEE: AMEX DISCOUNT FEE		Category/ Type 001	FEC Identification Number C00566174 Transaction ID : SB21B.16930
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 138.62	
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)..... ▶

1267.70

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: USA ePAY FEE

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement: 05 / 08 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16939

Amount of Each Disbursement this Period: 20.00

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: 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: 05 / 16 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16942

Amount of Each Disbursement this Period: 211.70

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
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2018

FEC Identification Number: C00566174
Transaction ID : SB21B.16925

Amount of Each Disbursement this Period: 7.95

Memo Item

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

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

239.65

**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 MM / DD / YYYY 06 / 04 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16928	
City SUGARLAND	State TX	Zip Code 77478	Amount of Each Disbursement this Period 65.95
Purpose of Disbursement BANK FEE: MERCHANT SERVICES DISCOUNT FEE		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16931	
City SUGARLAND	State TX	Zip Code 77478	Amount of Each Disbursement this Period 935.58
Purpose of Disbursement BANK FEE: INTERCHNG FEE		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 06 / 04 / 2018	
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16934	
City SUGARLAND	State TX	Zip Code 77478	Amount of Each Disbursement this Period 524.65
Purpose of Disbursement BANK FEE: MERCHANT SERVICES FEE		Category/ Type 001	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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).....▶	1526.18
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 MM / DD / YYYY 06 / 05 / 2018
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16937
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BANK FEE: AMEX DISCOUNT FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 176.32
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) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 06 / 06 / 2018
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16940
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BANK FEE: USA ePAY FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 20.00
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: _____	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 06 / 18 / 2018
Mailing Address 2353 TOWN CENTER DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16943
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BANK FEE: ACCOUNT ANALYSIS FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 218.23
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)..... ▶

414.55

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. IMAGINE IT DESIGN LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2018
Mailing Address 1052 LYNN ROMERO DR		FEC Identification Number C00566174 Transaction ID : SB21B.16947 Amount of Each Disbursement this Period 1250.00
City BREAUX BRIDGE	State LA	
Zip Code 70517		Memo Item <input type="checkbox"/>
Purpose of Disbursement CONSULTING - WEBSITE & COMMUNICATIONS		
Candidate Name TEA PARTY MAJORITY FUND		
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. IMAGINE IT DESIGN LLC		Date of Disbursement MM / DD / YYYY 04 / 02 / 2018
Mailing Address 1052 LYNN ROMERO DR		FEC Identification Number C00566174 Transaction ID : SB21B.16948 Amount of Each Disbursement this Period 5500.00
City BREAUX BRIDGE	State LA	
Zip Code 70517		Memo Item <input type="checkbox"/>
Purpose of Disbursement CONSULTING - WEBSITE & COMMUNICATIONS		
Candidate Name TEA PARTY MAJORITY FUND		
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. IMAGINE IT DESIGN LLC		Date of Disbursement MM / DD / YYYY 06 / 27 / 2018
Mailing Address 1052 LYNN ROMERO DR		FEC Identification Number C00566174 Transaction ID : SB21B.16948 Amount of Each Disbursement this Period 5000.00
City BREAUX BRIDGE	State LA	
Zip Code 70517		Memo Item <input type="checkbox"/>
Purpose of Disbursement CONSULTING - WEBSITE & COMMUNICATIONS		
Candidate Name TEA PARTY MAJORITY FUND		
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).....▶	11750.00
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 04 / 09 / 2018
Mailing Address 325 SPRINGSIDE DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16960
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES		Category/ Type 003
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 15305.51
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) B. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 04 / 25 / 2018
Mailing Address 325 SPRINGSIDE DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16961
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES		Category/ Type 003
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 28710.54
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. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 05 / 17 / 2018
Mailing Address 325 SPRINGSIDE DRIVE		FEC Identification Number C00566174 Transaction ID : SB21B.16962
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement PHONE BANK: VOTER CONTACT SERVICES		Category/ Type 003
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 23163.86
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).....▶	67179.91
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. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PHONE BANK: VOTER CONTACT SERVICES

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

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

FEC Identification Number
C 00566174
Transaction ID : SB21B.16963
Amount of Each Disbursement this Period
14708.15

Memo Item

Full Name (Last, First, Middle Initial)
B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PHONE BANK: VOTER CONTACT SERVICES

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

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

FEC Identification Number
C 00566174
Transaction ID : SB21B.16964
Amount of Each Disbursement this Period
29653.29

Memo Item

Full Name (Last, First, Middle Initial)
C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
PHONE BANK: VOTER CONTACT SERVICES

Candidate Name

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

State: District:

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

FEC Identification Number
C
Transaction ID : SB21B.16965
Amount of Each Disbursement this Period
26400.08

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 70761.52

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. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
LN 21b DISBURSEMENTS TRANSFERRED TO LN 24

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement
MM / DD / YYYY
06 / 30 / 2018

FEC Identification Number
C C00566174
Transaction ID : SB21B.16974
Amount of Each Disbursement this Period
- 118388.47

Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

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

FEC Identification Number
C C00566174
Transaction ID : SB21B.16944
Amount of Each Disbursement this Period
3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

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

FEC Identification Number
C C00566174
Transaction ID : SB21B.16945
Amount of Each Disbursement this Period
3500.00

Memo Item

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

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

- 111388.47

**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. 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
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
06 / 01 / 2018

FEC Identification Number
C 00566174
Transaction ID : SB21B.16946

Amount of Each Disbursement this Period
3500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	54327.53

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)
TEA PARTY MAJORITY FUND

A. JOHN MCCANN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1010

City HACKENSACK State NJ Zip Code 07602

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
MCCANN, JOHN JOSEPH MR. JR., , ,

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

State: NJ District: 05

Date of Disbursement: 05 / 24 / 2018

FEC Identification Number: C 00661637
Transaction ID : SB23.16969

Amount of Each Disbursement this Period: 2500.00

Memo Item

B. JOHN MCCANN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 1010

City HACKENSACK State NJ Zip Code 07602

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
MCCANN, JOHN JOSEPH MR. JR., , ,

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

State: NJ District: 05

Date of Disbursement: 05 / 26 / 2018

FEC Identification Number: C 00661637
Transaction ID : SB23.16972

Amount of Each Disbursement this Period: 2500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. CHARLEBOIS 347, EDWARD, , MR,

Full Name (Last, First, Middle Initial)

Mailing Address 20639 PRINCE RANIER PL

City LEESBURG State FL Zip Code 34748

Purpose of Disbursement REFUND: CC REVERSAL OF 3/21/2018 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 10 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17003

Amount of Each Disbursement this Period: 50.00

Memo Item

B. DAVIES 208, ROBERT, , MR,

Full Name (Last, First, Middle Initial)

Mailing Address 10109 SORREL AVE

City POTOMAC State MD Zip Code 20854

Purpose of Disbursement CC REVERSAL OF 3/08/2018 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 09 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17004

Amount of Each Disbursement this Period: 100.00

Memo Item

C. ROSS 372, DORIS B, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 209 MYHR GRN

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement REFUND: CC REVERSAL OF 10/30/2017 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 23 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17005

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 175.00

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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. ROSS 372, DORIS B, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 209 MYHR GRN

City NASHVILLE State TN Zip Code 37221

Purpose of Disbursement REFUND: CC REVERSAL OF 1/29/2018 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 28 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17006

Amount of Each Disbursement this Period: 25.00

Memo Item

B. ROY 985, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 211 E PENZANCE RD

City SHELTON State WA Zip Code 98584

Purpose of Disbursement REFUND: CC REVERSAL OF 1/19/2017 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17007

Amount of Each Disbursement this Period: 100.00

Memo Item

C. ROY 985, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 211 E PENZANCE RD

City SHELTON State WA Zip Code 98584

Purpose of Disbursement REFUND: CC REVERSAL OF 4/19/2017 CONTRIBUTION

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 06 / 2018

FEC Identification Number: C00566174
Transaction ID : SB28A.17008

Amount of Each Disbursement this Period: 100.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 225.00

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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17009	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement REFUND: CC REVERSAL OF 7/19/2017 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17010	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement REFUND: CC REVERSAL OF 10/19/2017 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17011	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement REFUND: CC REVERSAL OF 1/19/2018 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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).....▶	300.00
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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 11 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17012	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement REFUND: CC REVERSAL OF 4/19/2018 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17013	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement DUPLICATE REVERSAL OF 7/19/2017 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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. ROY 985, ANN, , MS,		Date of Disbursement MM / DD / YYYY 06 / 28 / 2018	
Mailing Address 211 E PENZANCE RD		FEC Identification Number C00566174 Transaction ID : SB28A.17014	
City SHELTON	State WA	Zip Code 98584	Amount of Each Disbursement this Period 100.00
Purpose of Disbursement DUPLICATE REVERSAL OF 10/19/2017 CONTRIBUTION		Category/ Type 010	Memo Item <input type="checkbox"/>
Candidate Name TEA PARTY MAJORITY FUND			
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).....▶	300.00
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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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. ROY 985, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 211 E PENZANCE RD

City SHELTON State WA Zip Code 98584

Purpose of Disbursement
DUPLICATE REVERSAL OF 1/19/2018 CONTRIBUTION

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: 06 / 28 / 2018

FEC Identification Number: C 00566174
Transaction ID : SB28A.17015

Amount of Each Disbursement this Period: 100.00

Memo Item

B. ROY 985, ANN, , MS,

Full Name (Last, First, Middle Initial)

Mailing Address 211 E PENZANCE RD

City SHELTON State WA Zip Code 98584

Purpose of Disbursement
DUPLICATE REVERSAL OF 4/19/2018 CONTRIBUTION

Candidate Name
TEA PARTY MAJORITY FUND

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: 06 / 28 / 2018

FEC Identification Number: C 00566174
Transaction ID : SB28A.17016

Amount of Each Disbursement this Period: 100.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	1200.00

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. PA FOR PEG (PEG LUKSIK FOR LT GOVERNOR)

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 404

City JOHNSTOWN State PA Zip Code 15907

Purpose of Disbursement
POLITICAL CONTRIBUTION (STATE RACE)

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement
MM / DD / YYYY
05 / 07 / 2018

FEC Identification Number
C 00566174
Transaction ID : SB29.16973

Amount of Each Disbursement this Period
1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 82
	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 <input type="text" value="118777.27"/>	Transaction ID : SD10.10540	
Amount Incurred This Period <input type="text" value="21000.00"/>	Payment This Period <input type="text" value="137941.43"/>	Outstanding Balance at Close of This Period <input type="text" value="1835.84"/>

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 <input type="text"/>	Transaction ID :	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

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 <input type="text"/>	Transaction ID :	
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1835.84"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="1835.84"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1835.84"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND
FEC IDENTIFICATION NUMBER
C C00566174

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
INFOCISION MANAGEMENT CORP
Mailing Address
325 SPRINGSIDE DRIVE
City
AKRON State
OH Zip Code
44333
Purpose of Expenditure
PHONE BANK: VOTER CONTACT CALLS
Category/Type
004
Name of Federal Candidate:
TRUMP, DONALD J, ,
Support
Office Sought:
President
District: 00
State:
Disbursement For:
General
Amount
12968.85
Transaction ID : SE.16975
Date of Disbursement or Obligation
04 / 09 / 2018

Full Name of Payee
INFOCISION MANAGEMENT CORP
Mailing Address
325 SPRINGSIDE DRIVE
City
AKRON State
OH Zip Code
44333
Purpose of Expenditure
PHONE BANK: VOTER CONTACT CALLS
Category/Type
004
Name of Federal Candidate:
TRUMP, DONALD J, ,
Support
Office Sought:
President
District: 00
State:
Disbursement For:
General
Amount
24765.28
Transaction ID : SE.16976
Date of Disbursement or Obligation
04 / 25 / 2018

(a) SUBTOTAL of Itemized Independent Expenditures 37734.13
(b) SUBTOTAL of Unitemized Independent Expenditures.....
(c) TOTAL Independent Expenditures

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, ,

[Electronically Filed]

Date 09 / 09 / 2018

Signature

**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;"> 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 03 / 12 / 2018		
Mailing Address 325 SPRINGSIDE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19884.20</div>		
City AKRON	State OH	Zip Code 44333			
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.16977 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 17 / 2018		
Name of Federal Candidate: TRUMP, DONALD J, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 63841.06			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 03 / 12 / 2018		
Mailing Address 325 SPRINGSIDE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12443.17</div>		
City AKRON	State OH	Zip Code 44333			
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.16978 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 05 / 30 / 2018		
Name of Federal Candidate: TRUMP, DONALD J, , ,			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____ <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought 76284.23			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; width: 100%;">32327.37</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"></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, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
09 / 09 / 2018

Signature

**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;"> 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 03 / 12 / 2018		
Mailing Address 325 SPRINGSIDE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25594.90</div>		
City AKRON	State OH	Zip Code 44333			
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.16979 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 14 / 2018		
Name of Federal Candidate: TRUMP, DONALD J, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 101879.13			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <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 03 / 12 / 2018		
Mailing Address 325 SPRINGSIDE DRIVE			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22732.07</div>		
City AKRON	State OH	Zip Code 44333			
Purpose of Expenditure PHONE BANK: VOTER CONTACT CALLS		Category/Type 004	Transaction ID : SE.16980 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 06 / 26 / 2018		
Name of Federal Candidate: TRUMP, DONALD J, , ,			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 124611.20			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;">48326.97</div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; height: 20px;"> </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;">118388.47</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, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
09 / 09 / 2018

Signature