

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

True North PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="16512.68"/>	<input type="text" value="16512.68"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="16512.68"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="162830.00"/>	<input type="text" value="162830.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="179342.68"/>	<input type="text" value="179342.68"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="151594.81"/>	<input type="text" value="151594.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27747.87"/>	<input type="text" value="27747.87"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="7500.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

True North PAC

Report Covering the Period: From: 01 / 01 / 2019 To: 06 / 30 / 2019

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).....	58450.00	58450.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	58450.00	58450.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	83500.00	83500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	141950.00	141950.00
12. Transfers From Affiliated/Other Party Committees.....	20880.00	20880.00
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)).....▶	162830.00	162830.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	162830.00	162830.00

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	96594.81	96594.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	96594.81	96594.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	55000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	151594.81	151594.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	151594.81	151594.81

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)	141950.00	141950.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	141950.00	141950.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	96594.81	96594.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	96594.81	96594.81

**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 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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)
True North PAC

A. Arison, Madeleine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Alhambra Plz, Suite 1040
 City Coral Gables State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M&M Arison Family Foundation Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **04 / 03 / 2019**
Transaction ID : SA11AI.6322
 Amount of Each Receipt this Period 3000.00
 Memo Item Contribution

B. Arison, Madeleine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Alhambra Plz, Suite 1040
 City Coral Gables State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) M&M Arison Family Foundation Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : SA11AI.6332
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

C. Arison, Micky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Alhambra Plz, Suite 1040
 City Coral Gables State FL Zip Code 33154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carnival Cruise Lines Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **04 / 03 / 2019**
Transaction ID : SA11AI.6323
 Amount of Each Receipt this Period 3000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	8000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 63
	<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)
True North PAC

A. Arison, Micky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Alhambra Plz, Suite 1040
 City Coral Gables State FL Zip Code 33154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Carnival Cruise Lines Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 04 / 29 / 2019
Transaction ID : SA11AI.6333
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

B. Armstrong, Elisabeth, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 E Stanford Ave
 City Cherry Hills Village State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Epoch Estate Wines Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 21 / 2019
Transaction ID : SA11AI.6170
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. Armstrong, William, D., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 E Stanford Ave
 City Cherry Hills Village State CO Zip Code 80113
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Armstrong Oil & Gas Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 21 / 2019
Transaction ID : SA11AI.6171
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	12000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 63
<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)
True North PAC

A. Betz, Nathaniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2411 Belmont Dr
 City Anchorage State AK Zip Code 99517
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Coastal Villages Region Fund Occupation (for Individual) Community Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 09 / 2019
Transaction ID : SA11AI.6411
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

B. BGR Government Affairs, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 14416
 City Washington State DC Zip Code 20044
 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 ▼ 500.00

Date of Receipt 03 / 05 / 2019
Transaction ID : SA11AI.6119
 Amount of Each Receipt this Period 500.00
 Memo Item Partnership: See Memo

C. Rogers, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 Thirteenth Street, NW Eleventh Floor South
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BGR Government Affairs, LLC Occupation (for Individual) Founding Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2019
Transaction ID : SA11AI.6119.0
 Amount of Each Receipt this Period 500.00
 Memo Item Partnership Attribution

SUBTOTAL of Receipts This Page (optional).....▶	2000.00
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 63
	<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)
True North PAC

A. Binkley, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5325 Chena Small Tracts
 City Fairbanks State AK Zip Code 99709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2019
Transaction ID : SA11AI.6316
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. Cornick, Kenneth, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21 Leonard St Apt 2
 City New York State NY Zip Code 10013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CLEAR Occupation (for Individual) Co-Founder / President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 03 / 05 / 2019
Transaction ID : SA11AI.6130
 Amount of Each Receipt this Period 2700.00
 Memo Item Contribution

C. Cotterell, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4606 Old Mill Road
 City Alexandria State VA Zip Code 22309
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) General Atomics Occupation (for Individual) Directory Legislative Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 18 / 2019
Transaction ID : SA11AI.6429
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00
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 63
	<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)
True North PAC

A. Duncan, Ronald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2550 Denali Street Ste 1000
 City Anchorage State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GCI Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **02 / 12 / 2019**
Transaction ID : SA11AI.6106
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. Fain, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Arvida Parkway
 City Miami State FL Zip Code 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt **04 / 03 / 2019**
Transaction ID : SA11AI.6320
 Amount of Each Receipt this Period 2700.00
 Memo Item Contribution

C. Fain, Colleen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Arvida Parkway
 City Miami State FL Zip Code 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : SA11AI.6334
 Amount of Each Receipt this Period 2300.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 6000.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 63
	<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)
True North PAC

A. Fain, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Arvida Pkwy
 City Coral Gables State FL Zip Code 33156
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Royal Caribbean Cruises Ltd. Occupation (for Individual) Chairman & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 04 / 03 / 2019
Transaction ID : SA11AI.6319
 Amount of Each Receipt this Period 3000.00
 Memo Item Contribution

B. Gerondale, Kenneth, L, , Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5400 Homer Drive
 City Anchorage State AK Zip Code 99518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Construction Machinery Occupation (for Individual) CEO/President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 29 / 2019
Transaction ID : SA11AI.6315
 Amount of Each Receipt this Period 2000.00
 Memo Item Contribution

C. Graham, Howard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14980 Karl Ave
 City Monte Sereno State CA Zip Code 95030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 26 / 2019
Transaction ID : SA11AI.6275
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 63
	<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)
True North PAC

A. Hirschmann, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4875 Maury Lane
 City Alexandria State VA Zip Code 22304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Williams & Jensen Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 06 / 04 / 2019
Transaction ID : SA11AI.6414
 Amount of Each Receipt this Period 1500.00
 Memo Item Contribution

B. Hobbs, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1903 Mallinson Way
 City Alexandria State VA Zip Code 22308
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Hobbs Group LLC Occupation (for Individual) Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 20 / 2019
Transaction ID : SA11AI.6110
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Jordan, Jennine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7840 Spruce Street
 City Anchorage State AK Zip Code 99507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Calista Corporation Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 12 / 2019
Transaction ID : SA11AI.6103
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 63
	<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)
True North PAC

A. McMackin, John, J., Jr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5 West Melrose Street
 City Chevy Chase State MD Zip Code 20815
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Williams & Jensen Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **03 / 22 / 2019**
Transaction ID : SA11AI.6266
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. Miller, Donald, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 Via Tortuga
 City Palm Beach State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Axiom Investors LLC Occupation (for Individual) Asset Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 12 / 2019**
Transaction ID : SA11AI.6101
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. Miller, Priscilla, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 Via Tortuga
 City Palm Beach State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Volunteer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 12 / 2019**
Transaction ID : SA11AI.6102
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 63
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Thom, Gregory, , ,

Mailing Address 309 Riley Street

City Falls Church	State VA	Zip Code 22046
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Ultra Electronics	Occupation (for Individual) Congressional Relations
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2019

Transaction ID : SA11AI.6426

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	58450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. AMERICAN CHEMISTRY COUNCIL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 2ND STREET, NE

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

FEC ID number of contributing federal political committee. **C** C00252338

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2019

Transaction ID : SA11C.6314

Amount of Each Receipt this Period
3000.00

Memo Item Contribution

B. AMERICAN WATERWAYS OPERATORS-PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 N. QUINCY STREET, SUITE 200

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

FEC ID number of contributing federal political committee. **C** C00034678

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2019

Transaction ID : SA11C.6434

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1625 PRINCE STREET SUITE 225

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

FEC ID number of contributing federal political committee. **C** C00250399

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2019

Transaction ID : SA11C.6437

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	13000.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. BP CORPORATION NORTH AMERICA INC. POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 WESTLAKE PARK BLVD
 City HOUSTON State TX Zip Code 77079
 FEC ID number of contributing federal political committee. **C** C00060103
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **05 / 30 / 2019**
Transaction ID : SA11C.6407
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

B. CHUGACH ALASKA CORPORATION PAC AKA CAC PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3800 CENTERPOINT DRIVE SUITE 1200
 City ANCHORAGE State AK Zip Code 99503
 FEC ID number of contributing federal political committee. **C** C00564377
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 07 / 2019**
Transaction ID : SA11C.6168
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. CRUISE LINES INTERNATIONAL ASSOCIATION PAC (CLIA PAC)
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 F STREET NW SUITE 250
 City WASHINGTON State DC Zip Code 20004
 FEC ID number of contributing federal political committee. **C** C00432393
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **04 / 29 / 2019**
Transaction ID : SA11C.6336
 Amount of Each Receipt this Period 2500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. DELOITTE POLITICAL ACTION COMMITTEE

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

Mailing Address P.O. BOX 365

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2019

Transaction ID : SA11C.6400

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. DELTA AIR LINES POLITICAL ACTION COMMITTEE

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

Mailing Address 1212 NEW YORK AVENUE NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00104802

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2019

Transaction ID : SA11C.6409

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. DOW INC. PAC (DOWPAC)

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

Mailing Address GLOBAL DOW CENTER
2211 H.H. DOW WAY

City MIDLAND	State MI	Zip Code 48674
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00074096

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2019

Transaction ID : SA11C.6128

Amount of Each Receipt this Period
3000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	13000.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2019

Transaction ID : SA11C.6318

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2019

Transaction ID : SA11C.6433

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		28		2019

Transaction ID : SA11C.6438

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. FAA MANAGERS ASSOCIATION INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1015 ATLANTIC BLVD.
SUITE 245

City ATLANTIC BEACH State FL Zip Code 32233

FEC ID number of contributing federal political committee. **C** C00366070

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 12 / 2019

Transaction ID : SA11C.6105

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. GENERAL ATOMICS POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85608

City SAN DIEGO State CA Zip Code 92186

FEC ID number of contributing federal political committee. **C** C00215285

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2019

Transaction ID : SA11C.6126

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
02 / 15 / 2019

Transaction ID : SA11C.6107

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

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

Mailing Address 101 CONSTITUTION AVE. NW
SUITE 500 WEST

City WASHINGTON State DC Zip Code 20001

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 13 / 2019

Transaction ID : SA11C.6425

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. INDEPENDENCE BLUE CROSS PAC (IBC PAC)

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

Mailing Address 1901 MARKET STREET

City PHILADELPHIA State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00450056

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2019

Transaction ID : SA11C.6278

Amount of Each Receipt this Period
1000.00

Memo Item Contribution earmarked through Citizens For Prosperity In America Today PAC

C. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC

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

Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00491654

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2019

Transaction ID : SA11C.6278.0

Amount of Each Receipt this Period
1000.00

Memo Item Total earmarked through conduit: limit not affected

SUBTOTAL of Receipts This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. PEABODY ENERGY CORPORATION POLITICAL ACTION COMMITTEE (PEABODY PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 MARKET STREET

City ST. LOUIS	State MO	Zip Code 63101
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00110478

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2019

Transaction ID : SA11C.6117

Amount of Each Receipt this Period
3000.00

Memo Item Contribution

B. PINNACLE WEST CAPITAL CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 801 PENNSYLVANIA AVE NW SUITE 214

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

FEC ID number of contributing federal political committee. **C** C00015933

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2019

Transaction ID : SA11C.6125

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. PRINTING INDUSTRIES OF AMERICA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 G STREET NW SUITE 500

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00018028

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2019

Transaction ID : SA11C.6116

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	9000.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. SOUTHERN COMPANY EMPLOYEES PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 RALPH MCGILL BOULEVARD NE
BIN 10111

City ATLANTA	State GA	Zip Code 30308
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144774

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		04		2019

Transaction ID : SA11C.6114

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

B. UNITED PARCEL SERVICE INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2019

Transaction ID : SA11C.6317

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00164145

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2019

Transaction ID : SA11C.6397

Amount of Each Receipt this Period
3000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA EMPLOYEE PAC

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO State TX Zip Code 78288

FEC ID number of contributing federal political committee. **C** C00164145

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2019

Transaction ID : SA11C.6435

Amount of Each Receipt this Period
2000.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2019

Transaction ID : SA11C.6127

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line number only).....▶	83500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. CORNYN SULLIVAN 2020
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 S. WASHINGTON STREET
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00694661

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10880.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 29 / 2019

Transaction ID : SA12.6303

Amount of Each Receipt this Period
10880.00

Memo Item
JFC Disbtribution

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

Mailing Address PO Box 130130

City Houston State TX Zip Code 77219

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

Name of Employer (for Individual) Occupation (for Individual)
Silver Eagle Distributors CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 21 / 2019

Transaction ID : SA12.6303.0

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

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

Mailing Address PO Box 16757

City Sugar Land State TX Zip Code 77479

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

Name of Employer (for Individual) Occupation (for Individual)
PHI, Inc. CEO

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
02 / 26 / 2019

Transaction ID : SA12.6303.1

Amount of Each Receipt this Period
2400.00

Memo Item
Transfer Memo

SUBTOTAL of Receipts This Page (optional).....▶	10880.00
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 63
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. Hildebrand, Jeffrey, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. Box 1308

City Houston	State TX	Zip Code 77251
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Hilcorp Energy Company	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2019

Transaction ID : SA12.6303.2

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

B. Sullivan Victory 2020
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N Washington St, Suite 700

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00609255

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2019

Transaction ID : SA12.6439

Amount of Each Receipt this Period
10000.00

Memo Item
JFC Disbtribution

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

Mailing Address 3881 Clay Street

City San Francisco	State CA	Zip Code 94118
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) Route One Investment Co.	Occupation (for Individual) Portfolio Manager
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2019

Transaction ID : SA12.6439.0

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

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

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

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

FOR LINE NUMBER: PAGE 26 OF 63
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
True North PAC

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

Mailing Address **3881 Clay Street**

City San Francisco	State CA	Zip Code 94118
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) Self Employed	Occupation (for Individual) Filmmaker
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 27 / 2019

Transaction ID : SA12.6439.1

Amount of Each Receipt this Period
5000.00

Memo Item
Transfer Memo

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	20880.00

**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)
True North PAC

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 02 / 27 / 2019	
Mailing Address PO Box 650448		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6132 Amount of Each Disbursement this Period 3242.98	
City Dallas	State TX	Zip Code 75265	Category/ Type
Purpose of Disbursement Credit Card Payment: See Memos			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement MM / DD / YYYY 01 / 16 / 2019	
Mailing Address PO Box 650448		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6132.0 Amount of Each Disbursement this Period - 35.77	
City Dallas	State TX	Zip Code 75265	Category/ Type
Purpose of Disbursement Vendor Rebate			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Alaska Airlines		Date of Disbursement MM / DD / YYYY 02 / 06 / 2019	
Mailing Address PO Box 68900		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6132. Amount of Each Disbursement this Period - 45.00	
City Seattle	State WA	Zip Code 98168	Category/ Type
Purpose of Disbursement Vendor Refund			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	3242.98
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)
True North PAC

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement MM / DD / YYYY 12 / 16 / 2018	
Mailing Address PO Box 650448				
City Dallas	State TX	Zip Code 75265	FEC Identification Number C	
Purpose of Disbursement Vendor Rebate			Transaction ID : SB21B.6132.3	
Candidate Name			Amount of Each Disbursement this Period - 6.94	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) B. Alaska Airlines			Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address PO Box 68900				
City Seattle	State WA	Zip Code 98168	FEC Identification Number C	
Purpose of Disbursement PAC Airfare			Transaction ID : SB21B.6132.3	
Candidate Name			Amount of Each Disbursement this Period 688.32	
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 checked="" type="checkbox"/> Memo Item	
State: District:				

Full Name (Last, First, Middle Initial) C. Alaska Airlines			Date of Disbursement MM / DD / YYYY 02 / 01 / 2019	
Mailing Address PO Box 68900				
City Seattle	State WA	Zip Code 98168	FEC Identification Number C	
Purpose of Disbursement PAC Travel Expense			Transaction ID : SB21B.6132.3	
Candidate Name			Amount of Each Disbursement this Period 45.00	
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 checked="" type="checkbox"/> Memo Item	
State: District:				

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial)

A. Alaska Airlines

Mailing Address PO Box 68900

City: Seattle State: WA Zip Code: 98168

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2019

FEC Identification Number

C
Transaction ID : SB21B.6132.!
Amount of Each Disbursement this Period
396.30

Memo Item

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S. Wacker Drive

City: Chicago State: IL Zip Code: 60606

Purpose of Disbursement
PAC Travel Expense

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2019

FEC Identification Number

C
Transaction ID : SB21B.6132.6
Amount of Each Disbursement this Period
9.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Alaska Airlines

Mailing Address PO Box 68900

City: Seattle State: WA Zip Code: 98168

Purpose of Disbursement
PAC Airfare

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 04 / 2019

FEC Identification Number

C
Transaction ID : SB21B.6132.
Amount of Each Disbursement this Period
124.31

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6132.4

Amount of Each Disbursement this Period: 417.00

Memo Item

B. 10th and M Seafoods

Full Name (Last, First, Middle Initial)

Mailing Address N Muldoon Rd

City Anchorage State AK Zip Code 99501

Purpose of Disbursement PAC Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6132.9

Amount of Each Disbursement this Period: 369.42

Memo Item

C. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6132.

Amount of Each Disbursement this Period: 517.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. United Airlines		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019
Mailing Address 233 S. Wacker Drive		FEC Identification Number C Transaction ID : SB21B.6132. Amount of Each Disbursement this Period 435.30
City Chicago	State IL	
Zip Code 60606	Purpose of Disbursement PAC Airfare	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Alamo Car Rental		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019
Mailing Address 600 Corporate Park Dr		FEC Identification Number C Transaction ID : SB21B.6132.1 Amount of Each Disbursement this Period 328.74
City St Louis	State MO	
Zip Code 63105	Purpose of Disbursement PAC Travel Expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. American Express		Date of Disbursement MM / DD / YYYY 03 / 21 / 2019
Mailing Address PO Box 650448		FEC Identification Number C Transaction ID : SB21B.6174 Amount of Each Disbursement this Period 13427.76
City Dallas	State TX	
Zip Code 75265	Purpose of Disbursement Credit Card Payment: See Memos	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	13427.76
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)
True North PAC

Full Name (Last, First, Middle Initial) A. Acqua AI 2		Date of Disbursement MM / DD / YYYY 02 / 11 / 2019	
Mailing Address 212 7th Street SE		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period 2222.69	
City Washington	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement PAC Event Expense: Food & Beverage			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement MM / DD / YYYY 02 / 14 / 2019	
Mailing Address 233 S. Wacker Drive		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period 47.00	
City Chicago	State IL	Zip Code 60606	Category/ Type
Purpose of Disbursement PAC Travel Expense			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 02 / 17 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period 43.72	
City San Francisco	State CA	Zip Code 94105	Category/ Type
Purpose of Disbursement PAC Transportation			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 02 / 17 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period 8.99	
City San Francisco	State CA	Zip Code 94105	Category/ Type
Purpose of Disbursement PAC Transportation			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 02 / 17 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174.8 Amount of Each Disbursement this Period 10.24	
City San Francisco	State CA	Zip Code 94105	Category/ Type
Purpose of Disbursement PAC Transportation			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. La Quinta Resort		Date of Disbursement MM / DD / YYYY 02 / 18 / 2019	
Mailing Address 49499 Eisenhower Drive		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6174. Amount of Each Disbursement this Period 7403.11	
City La Quinta	State CA	Zip Code 92253	Category/ Type
Purpose of Disbursement PAC Event Expense: Lodging/Food & Beverage			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial)
A. Thrifty Car Rental

Date of Disbursement: MM / DD / YYYY
02 / 19 / 2019

Mailing Address: 4940 W Int. Airport Rd

City: Anchorage State: AK Zip Code: 99517

Purpose of Disbursement: PAC Transportation

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.6174.**

Amount of Each Disbursement this Period: 440.95

Memo Item

Full Name (Last, First, Middle Initial)
B. Uber

Date of Disbursement: MM / DD / YYYY
02 / 19 / 2019

Mailing Address: 182 Howard Street Suite 8

City: San Francisco State: CA Zip Code: 94105

Purpose of Disbursement: PAC Transportation

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.6174.1**

Amount of Each Disbursement this Period: 34.61

Memo Item

Full Name (Last, First, Middle Initial)
C. Emerald Transportation Service

Date of Disbursement: MM / DD / YYYY
02 / 19 / 2019

Mailing Address: PO Box 133

City: Palm Desert State: CA Zip Code: 92261

Purpose of Disbursement: PAC Transportation

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: Primary General Other (specify) ▼

FEC Identification Number: **C**

Transaction ID : **SB21B.6174.**

Amount of Each Disbursement this Period: 420.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 02 / 20 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174. Amount of Each Disbursement this Period [] 5.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 02 / 20 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period [] 38.22	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 02 / 22 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174. Amount of Each Disbursement this Period [] 24.81	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 02 / 22 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174. Amount of Each Disbursement this Period [] 3.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 02 / 23 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174.1 Amount of Each Disbursement this Period [] 9.20	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 02 / 23 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6174. Amount of Each Disbursement this Period [] 1.00	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input checked="" type="checkbox"/> Memo Item		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 23 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.

Amount of Each Disbursement this Period: 9.92

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.2

Amount of Each Disbursement this Period: 10.20

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 24 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.

Amount of Each Disbursement this Period: 16.47

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

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

Mailing Address 4255 Amon Carter Blvd.

City Fort Worth State TX Zip Code 76155

Purpose of Disbursement PAC Travel Expense

Candidate Name

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

State: District:

Date of Disbursement: 02 / 11 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.2

Amount of Each Disbursement this Period: 30.00

Memo Item

Full Name (Last, First, Middle Initial)
B. Uber

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

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

State: District:

Date of Disbursement: 02 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.2

Amount of Each Disbursement this Period: 5.58

Memo Item

Full Name (Last, First, Middle Initial)
C. Uber

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

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

State: District:

Date of Disbursement: 02 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.2

Amount of Each Disbursement this Period: 29.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. The Breakers Hotel

Full Name (Last, First, Middle Initial)

Mailing Address 1 South County Road

City Palm Beach State FL Zip Code 33480

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 1163.90

Memo Item

B. United Airlines

Full Name (Last, First, Middle Initial)

Mailing Address 233 S. Wacker Drive

City Chicago State IL Zip Code 60606

Purpose of Disbursement PAC Travel Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 30.00

Memo Item

C. Eddie V's Prime Seafood

Full Name (Last, First, Middle Initial)

Mailing Address 1270 Prospect St

City La Jolla State CA Zip Code 92037

Purpose of Disbursement PAC Food & Beverage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 16 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 231.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Sheraton La Jolla

Full Name (Last, First, Middle Initial)

Mailing Address 3299 Holiday Ct

City La Jolla State CA Zip Code 92037

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 221.73

Memo Item

B. Sheraton La Jolla

Full Name (Last, First, Middle Initial)

Mailing Address 3299 Holiday Ct

City La Jolla State CA Zip Code 92037

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 201.73

Memo Item

C. Alamo Car Rental

Full Name (Last, First, Middle Initial)

Mailing Address 600 Corporate Park Dr

City St Louis State MO Zip Code 63105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6174.3

Amount of Each Disbursement this Period: 277.63

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. American Express

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 650448

City Dallas State TX Zip Code 75265

Purpose of Disbursement
Credit Card Payment: See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 06 / 2019

FEC Identification Number: C
Transaction ID : **SB21B.6340**
Amount of Each Disbursement this Period: 1207.66

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)
Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
PAC Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 17 / 2019

FEC Identification Number: C
Transaction ID : **SB21B.6340.C**
Amount of Each Disbursement this Period: 27.75

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)
Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
PAC Transportation

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 18 / 2019

FEC Identification Number: C
Transaction ID : **SB21B.6340.**
Amount of Each Disbursement this Period: 8.57

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1207.66

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)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 23 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.3

Amount of Each Disbursement this Period: 28.29

Memo Item

B. Delta Airlines

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 20980

City Atlanta State GA Zip Code 30320

Purpose of Disbursement PAC Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.3

Amount of Each Disbursement this Period: 430.80

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.3

Amount of Each Disbursement this Period: 16.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340.! Amount of Each Disbursement this Period [] 25.12	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:	Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 04 / 09 / 2019
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340.€ Amount of Each Disbursement this Period [] 7.42	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:	Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 04 / 09 / 2019
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340. Amount of Each Disbursement this Period [] 12.80	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:	SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 0.00
TOTAL This Period (last page this line number only)..... ▶		[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 04 / 09 / 2019
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340.1 Amount of Each Disbursement this Period [] 8.53
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement PAC Transportation		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 04 / 09 / 2019
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340.9 Amount of Each Disbursement this Period [] 9.44
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement PAC Transportation		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 04 / 10 / 2019
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340. Amount of Each Disbursement this Period [] 11.32
City San Francisco	State CA	Zip Code 94105
Purpose of Disbursement PAC Transportation		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.

Amount of Each Disbursement this Period: 11.98

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.1

Amount of Each Disbursement this Period: 17.32

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.

Amount of Each Disbursement this Period: 5.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340. Amount of Each Disbursement this Period [] 10.41	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement MM / DD / YYYY 04 / 12 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340.1 Amount of Each Disbursement this Period [] 13.20	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item
Full Name (Last, First, Middle Initial) C. Uber		Date of Disbursement MM / DD / YYYY 03 / 18 / 2019	
Mailing Address 182 Howard Street Suite 8		FEC Identification Number C [] Transaction ID : SB21B.6340. Amount of Each Disbursement this Period [] 9.71	
City San Francisco	State CA	Zip Code 94105	Category/ Type []
Purpose of Disbursement PAC Transportation		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	<input checked="" type="checkbox"/> Memo Item
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 0.00	
TOTAL This Period (last page this line number only)..... ▶		[]	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Monterey Marriott

Full Name (Last, First, Middle Initial)

Mailing Address 350 Calle Principal

City Monterey State CA Zip Code 93940

Purpose of Disbursement PAC Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 20 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.

Amount of Each Disbursement this Period: 265.45

Memo Item

B. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 21 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.1

Amount of Each Disbursement this Period: 156.43

Memo Item

C. Uber

Full Name (Last, First, Middle Initial)

Mailing Address 182 Howard Street Suite 8

City San Francisco State CA Zip Code 94105

Purpose of Disbursement PAC Transportation

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 22 / 2019

FEC Identification Number: C

Transaction ID : SB21B.6340.

Amount of Each Disbursement this Period: 39.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement MM / DD / YYYY 03 / 16 / 2019
Mailing Address PO Box 650448		FEC Identification Number C [] Transaction ID : SB21B.6340. Amount of Each Disbursement this Period [] - 32.84
City Dallas	State TX	Zip Code 75265
Purpose of Disbursement Vendor Rebate		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Anedot		Date of Disbursement MM / DD / YYYY 03 / 26 / 2019
Mailing Address PO Box 84314		FEC Identification Number C [] Transaction ID : SB21B.6274 Amount of Each Disbursement this Period [] 390.60
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement PAC Credit Card Processing		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Anedot		Date of Disbursement MM / DD / YYYY 06 / 04 / 2019
Mailing Address PO Box 84314		FEC Identification Number C [] Transaction ID : SB21B.6416 Amount of Each Disbursement this Period [] 58.80
City Baton Rouge	State LA	Zip Code 70884
Purpose of Disbursement PAC Credit Card Processing		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: [] District: []	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 449.40
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6421**

Amount of Each Disbursement this Period: 58.80

Memo Item

B. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 12 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6428**

Amount of Each Disbursement this Period: 58.80

Memo Item

C. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 18 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6431**

Amount of Each Disbursement this Period: 58.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 176.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Black Rock Group LLC		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	
Purpose of Disbursement PAC Strategic Consulting		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6328 Amount of Each Disbursement this Period [REDACTED] 10000.00	
Candidate Name		Category/Type [REDACTED]	
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. Black Rock Group LLC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2019	
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	
Purpose of Disbursement PAC Strategic Consulting		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6339 Amount of Each Disbursement this Period [REDACTED] 2500.00	
Candidate Name		Category/Type [REDACTED]	
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. Guillermo's Restaurant		Date of Disbursement MM / DD / YYYY 02 / 20 / 2019	
Mailing Address 72850 El Paseo			
City Palm Desert	State CA	Zip Code 92260	
Purpose of Disbursement PAC Event Expense: Food & Beverage		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6108 Amount of Each Disbursement this Period [REDACTED] 5537.04	
Candidate Name		Category/Type [REDACTED]	
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)..... ▶	[REDACTED] 18037.04
TOTAL This Period (last page this line number only)..... ▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 03 / 06 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [] Transaction ID : SB21B.6163 Amount of Each Disbursement this Period [] 1250.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 03 / 06 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [] Transaction ID : SB21B.6165 Amount of Each Disbursement this Period [] 1254.65
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 04 / 08 / 2019
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [] Transaction ID : SB21B.6326 Amount of Each Disbursement this Period [] 1291.02
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting/Compliance Services		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 3795.67
TOTAL This Period (last page this line number only).....▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. Koch & Hoos, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 901 N. Washington St.
Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 28 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6401

Amount of Each Disbursement this Period
1250.00

Memo Item

B. Koch & Hoos, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 901 N. Washington St.
Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 28 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6403

Amount of Each Disbursement this Period
1250.00

Memo Item

C. Koch & Hoos, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 901 N. Washington St.
Suite 700

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC Accounting/Compliance Services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 21 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6432

Amount of Each Disbursement this Period
1250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3750.00

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)
True North PAC

A. La Quinta Resort

Full Name (Last, First, Middle Initial)

Mailing Address 49499 Eisenhower Drive

City La Quinta State CA Zip Code 92253

Purpose of Disbursement
PAC Event Expense:Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 29 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6092**

Amount of Each Disbursement this Period: 6920.94

Memo Item

B. La Quinta Resort

Full Name (Last, First, Middle Initial)

Mailing Address 49499 Eisenhower Drive

City La Quinta State CA Zip Code 92253

Purpose of Disbursement
PAC Event Expense:Lodging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 27 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6113**

Amount of Each Disbursement this Period: 657.87

Memo Item

C. MKJ, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 5905 Gloster Rd

City Bethesda State MD Zip Code 20816

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 13 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.6169**

Amount of Each Disbursement this Period: 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17578.81

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)
True North PAC

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement MM / DD / YYYY 01 / 04 / 2019
Mailing Address 4255 Amon Carter Blvd.		FEC Identification Number C [] Transaction ID : SB21B.6094.1 Amount of Each Disbursement this Period [] 668.01
City Fort Worth	State TX	Zip Code 76155
Purpose of Disbursement PAC Airfare		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Rizzo, Laura, , ,		Date of Disbursement MM / DD / YYYY 03 / 22 / 2019
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [] Transaction ID : SB21B.6269 Amount of Each Disbursement this Period [] 373.88
City Alexandria	State VA	Zip Code 22308
Purpose of Disbursement Expense Reimbursement: See Memo		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Enterprise Rental Car		Date of Disbursement MM / DD / YYYY 02 / 15 / 2019
Mailing Address 4041 Airport Center Dr		FEC Identification Number C [] Transaction ID : SB21B.6269. Amount of Each Disbursement this Period [] 373.88
City Palm Springs	State CA	Zip Code 92264
Purpose of Disbursement PAC Transportation		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 373.88
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)
True North PAC

Full Name (Last, First, Middle Initial) A. Rizzo Dukes Group LLC		Date of Disbursement MM / DD / YYYY 01 / 29 / 2019	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6096 Amount of Each Disbursement this Period 6325.00	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Rizzo Dukes Group LLC		Date of Disbursement MM / DD / YYYY 05 / 28 / 2019	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6405 Amount of Each Disbursement this Period 5395.00	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Saltwater Safari Company		Date of Disbursement MM / DD / YYYY 03 / 22 / 2019	
Mailing Address PO Box 1689		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6267 Amount of Each Disbursement this Period 5995.50	
City Seward	State AK	Zip Code 99664	Category/ Type
Purpose of Disbursement PAC Event Expense: Fishing Charter			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	17715.50
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)
True North PAC

Full Name (Last, First, Middle Initial)
A. Saltwater Safari Company

Mailing Address PO Box 1689

City Seward State AK Zip Code 99664

Purpose of Disbursement
PAC Event Expense: Fishing Charter

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
04 / 08 / 2019

FEC Identification Number
C

Transaction ID : SB21B.6330

Amount of Each Disbursement this Period
6100.50

Memo Item

Full Name (Last, First, Middle Initial)
B.

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

Full Name (Last, First, Middle Initial)
C.

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)..... ▶ 6100.50

TOTAL This Period (last page this line number only)..... ▶ 96523.61

**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)
True North PAC

Full Name (Last, First, Middle Initial) A. BEN SASSE FOR US SENATE INC		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address 700 R ST UNIT 83978		FEC Identification Number C C00547976 Transaction ID : SB23.6288 Amount of Each Disbursement this Period 5000.00
City LINCOLN	State NE	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name SASSE, BENJAMIN E, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: NE	District: 00	

Full Name (Last, First, Middle Initial) B. BILL CASSIDY FOR US SENATE		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address PO BOX 80505		FEC Identification Number C C00543983 Transaction ID : SB23.6292 Amount of Each Disbursement this Period 5000.00
City BATON ROUGE	State LA	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name CASSIDY, WILLIAM, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: LA	District: 00	

Full Name (Last, First, Middle Initial) C. CAPITO FOR WEST VIRGINIA		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address PO BOX 11519		FEC Identification Number C C00539825 Transaction ID : SB23.6300 Amount of Each Disbursement this Period 5000.00
City CHARLESTON	State WV	
Purpose of Disbursement Contribution		Category/ Type
Candidate Name CAPITO, SHELLEY MOORE MS, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>
State: WV	District: 00	

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. CORY GARDNER FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 9227 E LINCOLN AVE #200-234

M M M	/	D D D	/	Y Y Y Y Y
03		27		2019

City LONE TREE State CO Zip Code 80124

FEC Identification Number

Purpose of Disbursement Contribution

C C00492454

Candidate Name GARDNER, CORY, , ,

Category/Type

Transaction ID : SB23.6283

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: CO District: 00

5000.00

Memo Item

B. COTTON FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 379

M M M	/	D D D	/	Y Y Y Y Y
03		29		2019

City DARDANELLE State AR Zip Code 72834

FEC Identification Number

Purpose of Disbursement Contribution

C C00499988

Candidate Name COTTON, THOMAS, , ,

Category/Type

Transaction ID : SB23.6310

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: AR District: 00

5000.00

Memo Item

C. FRIENDS OF JIM INHOFE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 13300

M M M	/	D D D	/	Y Y Y Y Y
06		28		2019

City OKLAHOMA CITY State OK Zip Code 73113

FEC Identification Number

Purpose of Disbursement Contribution

C C00207993

Candidate Name INHOFE, JAMES M, , ,

Category/Type

Transaction ID : SB23.6452

Amount of Each Disbursement this Period

Office Sought: House Senate President
 Disbursement For: 2020 Primary General Other (specify) ▼
 State: OK District: 00

5000.00

Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial) A. JONI FOR IOWA		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address PO BOX 93441		FEC Identification Number C00546788 Transaction ID : SB23.6297
City DES MOINES	State IA	Zip Code 50393
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name ERNST, JONI K, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA	District: 00	

Full Name (Last, First, Middle Initial) B. PERDUE FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address PO BOX 12077		FEC Identification Number C00547570 Transaction ID : SB23.6284
City ATLANTA	State GA	Zip Code 30355
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name PERDUE, DAVID, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 00	

Full Name (Last, First, Middle Initial) C. PERDUE FOR SENATE		Date of Disbursement MM / DD / YYYY 06 / 28 / 2019
Mailing Address PO BOX 12077		FEC Identification Number C00547570 Transaction ID : SB23.6444
City ATLANTA	State GA	Zip Code 30355
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 5000.00
Candidate Name PERDUE, DAVID, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 00	

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

15000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

A. TEAM GRAHAM, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1801

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement Contribution

Candidate Name GRAHAM, LINDSEY O., , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: SC District: 00

Date of Disbursement: 06 / 28 / 2019

FEC Identification Number: C00458828
Transaction ID : SB23.6446
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. TIM SCOTT FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address 1405 ASHLEY RIVER RD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement Contribution

Candidate Name SCOTT, TIMOTHY E., , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: SC District: 00

Date of Disbursement: 06 / 28 / 2019

FEC Identification Number: C00540302
Transaction ID : SB23.6449
Amount of Each Disbursement this Period: 5000.00

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:

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	55000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 63 OF 63
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Black Rock Group LLC			Nature of Debt (Purpose): PAC Strategic Consulting
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6504	
Amount Incurred This Period 2500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MKJ, Inc.			Nature of Debt (Purpose): PAC Fundraising Consulting
Mailing Address 5905 Gloster Rd			
City Bethesda	State MD	Zip Code 20816	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.6503	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	7500.00
2) TOTALS This Period (last page this line number only)..... ▶	7500.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	7500.00