

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Team Hill

ADDRESS (number and street) PO BOX 7244  
Check if different than previously reported. (ACC) LITTLE ROCK AR 72217

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00773903 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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

5. Covering Period 04 / 01 / 2023 through 06 / 30 / 2023

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

Signature of Treasurer Goode, Michael, , , [Electronically Filed] Date 07 / 15 / 2023

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

Team Hill

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="2023"/>		<input type="text" value="4203.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="37609.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="73850.00"/>	<input type="text" value="108450.00"/>
(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="111459.05"/>	<input type="text" value="112653.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="96434.05"/>	<input type="text" value="97628.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="15025.00"/>	<input type="text" value="15025.00"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

Team Hill

Report Covering the Period: From: 04 / 01 / 2023 To: 06 / 30 / 2023

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).....	69850.00	101450.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	69850.00	101450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4000.00	7000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	73850.00	108450.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	73850.00	108450.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	73850.00	108450.00

**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 .....	3508.25	4702.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3508.25	4702.25
22. Transfers to Affiliated/Other Party Committees.....	92925.80	92925.80
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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)) ..	96434.05	97628.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	96434.05	97628.05

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	73850.00	108450.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	73850.00	108450.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3508.25	4702.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3508.25	4702.25

**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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**Team Hill**

**A. AMES, KEAGHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 PARK ROAD NW  
 UNIT 7  
 City WASHINGTON State DC Zip Code 20010-1690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.39156**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**B. AMES, KEAGHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 762 PARK ROAD NW  
 UNIT 7  
 City WASHINGTON State DC Zip Code 20010-1690  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BGR GROUP Occupation (for Individual) VICE PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.39157**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. DATTILO, RYAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3905 BLACKTHORN ST.  
 City CHEVY CHASE State MD Zip Code 20815-5055  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AQUIA GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 01 / 2023  
**Transaction ID : SA11A.37910**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> 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 20
	<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)  
**Team Hill**

**A. DAYRIT, KRISTOFFER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 480 WAGNER RD  
 City NORTHFIELD State IL Zip Code 60093-2922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COINFLIP Occupation (for Individual) FOUNDER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 09 / 2023  
**Transaction ID : SA11A.39052**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. DOBBS, JAMES, K., MR., III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 241750  
 City MEMPHIS State TN Zip Code 38124-1750  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DOBBS BROTHERS MANAGEMENT Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 04 / 2023  
**Transaction ID : SA11A.37883**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item CONTRIBUTION

**C. DWYER, JOHN, W., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 ATLANTIC ST.  
 City MELBOURNE BEACH State FL Zip Code 32951-2009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITAL FUNDING GROUP INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 17300.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.39260**  
 Amount of Each Receipt this Period 4800.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10800.00
<b>TOTAL</b> 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 20
	<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)  
**Team Hill**

**A. DWYER, NANCY, E., MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 ATLANTIC ST.  
 City MELBOURNE BEACH State FL Zip Code 32951-2009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 57700.00

Date of Receipt 06 / 30 / 2023  
**Transaction ID : SA11A.39259**  
 Amount of Each Receipt this Period 45200.00  
 Memo Item CONTRIBUTION

**B. GUREVICH, ALAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3853 N KEELER AVE  
 City CHICAGO State IL Zip Code 60641-3007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COINFLIP Occupation (for Individual) HEAD OF ATM PLATFORMS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 22 / 2023  
**Transaction ID : SA11A.37983**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HOHLT, RICHARD, F., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7901 KENT RD  
 City FORT HUNT State VA Zip Code 22308-1328  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOHLT GROUP Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 9500.00

Date of Receipt 05 / 03 / 2023  
**Transaction ID : SA11A.37882**  
 Amount of Each Receipt this Period 6600.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52050.00
<b>TOTAL</b> 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 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Team Hill**

**A. JACOBS, JOSEPH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 S FLAGLER DR., STE 602E  
 C/O WEXFORD CAPITAL  
 City WEST PALM BEACH State FL Zip Code 33401-6122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEXFORD CAPITAL Occupation (for Individual) PARTNER  
 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 / 01 / 2023  
**Transaction ID : SA11A.37909**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item  
 CONTRIBUTION

**B. KIM, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7009 ARBOR LANE  
 City MC LEAN State VA Zip Code 22101-1545  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) THOMAS CAPITOL PARTNERS, INC. Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 09 / 2023  
**Transaction ID : SA11A.37928**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**C. METZNER, DAVID, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4611 HAWTHORNE LANE NW  
 City WASHINGTON State DC Zip Code 20016-3437  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ACG ANALYTICS Occupation (for Individual) MANAGING PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 27 / 2023  
**Transaction ID : SA11A.39155**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3750.00
<b>TOTAL</b> 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 20
	<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)  
**Team Hill**

**A. POLOTSKY, DANIEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 161 E CHICAGO AVE  
 UNIT 31C  
 City CHICAGO State IL Zip Code 60611-2620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COINFLIP Occupation (for Individual) FOUNDER AND CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 22 / 2023  
**Transaction ID : SA11A.37982**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item  
 CONTRIBUTION

**B. ROGERS, GEORGE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 501 CAPITOL COURT NE  
 SUITE 200  
 City WASHINGTON State DC Zip Code 20002-7708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) REPUBLIC CONSULTING Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2023  
**Transaction ID : SA11A.38030**  
 Amount of Each Receipt this Period  
 750.00  
 Memo Item  
 CONTRIBUTION  
 IN KIND- JFC FUNDRAISING CONSULTING

**C. SACKETT, DEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8541 RIVERSIDE RD  
 City ALEXANDRIA State VA Zip Code 22308-2206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FRANKLIN TEMPLETON Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 07 / 2023  
**Transaction ID : SA11A.37911**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> 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 20
<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)  
**Team Hill**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**WEISS, BENJAMIN, , ,**

Mailing Address **2 BRIDLE LANE**

City <b>BANNOCKBURN</b>	State <b>IL</b>	Zip Code <b>60015-1258</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) <b>COINFLIP</b>	Occupation (for Individual) <b>CEO</b>
--	---

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**05 / 22 / 2023**

**Transaction ID : SA11A.37984**

Amount of Each Receipt this Period  
**250.00**

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>69850.00</b>

**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 20
<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)  
**Team Hill**

**A. ASURION LLC POLITICAL ACTION COMMITTEE (ASURION PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 11TH AVE NORTH  
 City NASHVILLE State TN Zip Code 37203-6353  
 FEC ID number of contributing federal political committee. **C** C00450916  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **04 / 20 / 2023**  
**Transaction ID : SA11C.37829**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**B. ASURION LLC POLITICAL ACTION COMMITTEE (ASURION PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 11TH AVE NORTH  
 City NASHVILLE State TN Zip Code 37203-6353  
 FEC ID number of contributing federal political committee. **C** C00450916  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **06 / 01 / 2023**  
**Transaction ID : SA11C.38009**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. FIRST AMERICAN FINANCIAL CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 FIRST AMERICAN WAY  
 City SANTA ANA State CA Zip Code 92707-5913  
 FEC ID number of contributing federal political committee. **C** C00346726  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 6000.00

Date of Receipt **06 / 30 / 2023**  
**Transaction ID : SA11C.39111**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> 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 20
<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)  
**Team Hill**

**A. THRIVENT FINANCIAL FOR LUTHERANS POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO BOX 1892

City APPLETON	State WI	Zip Code 54912-1892
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00121319

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	/	D D	/	Y Y Y Y
06		08		2023

**Transaction ID : SA11C.38037**

Amount of Each Receipt this Period  
1000.00

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	4000.00

**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)  
**Team Hill**

Full Name (Last, First, Middle Initial)  
**A. ROGERS, GEORGE, , MR.,**

Date of Disbursement  
MM / DD / YYYY  
06 / 05 / 2023

Mailing Address 501 CAPITOL COURT NE  
SUITE 200

City WASHINGTON State DC Zip Code 20002-7708

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **SB21B.38030**  
Amount of Each Disbursement this Period  
750.00  
 Memo Item IN KIND- JFC FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)  
**B. CAMPAIGN MAIL & DATA, INC. DBA CMDI**

Date of Disbursement  
MM / DD / YYYY  
04 / 14 / 2023

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement JFC SOFTWARE

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **SB21B.I21262**  
Amount of Each Disbursement this Period  
250.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. CAMPAIGN MAIL & DATA, INC. DBA CMDI**

Date of Disbursement  
MM / DD / YYYY  
05 / 16 / 2023

Mailing Address 1593 SPRING HILL ROAD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement JFC SOFTWARE

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **SB21B.I2131**  
Amount of Each Disbursement this Period  
250.00  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1250.00

**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)  
**Team Hill**

Full Name (Last, First, Middle Initial)  
**A. CAMPAIGN MAIL & DATA, INC. DBA CMDI**

Date of Disbursement: MM / DD / YYYY  
06 / 14 / 2023

Mailing Address: 1593 SPRING HILL ROAD  
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: JFC SOFTWARE

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.I2139**  
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. PROFESSIONAL DATA SERVICES, INC**

Date of Disbursement: MM / DD / YYYY  
06 / 30 / 2023

Mailing Address: 824 SOUTH MILLEDGE AVENUE  
STE 101

City: ATHENS State: GA Zip Code: 30605

Purpose of Disbursement: JFC COMPLIANCE CONSULTING

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.I21461**  
Amount of Each Disbursement this Period: 1563.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RAISE THE MONEY, INC.**

Date of Disbursement: MM / DD / YYYY  
05 / 01 / 2023

Mailing Address: P.O. BOX 26466

City: LITTLE ROCK State: AR Zip Code: 72221

Purpose of Disbursement: JFC CC TRANSACTION FEES

Candidate Name: \_\_\_\_\_

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number: **C** \_\_\_\_\_  
Transaction ID : **SB21B.I2126**  
Amount of Each Disbursement this Period: 172.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1985.00

**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)  
**Team Hill**

**A. RAISE THE MONEY, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 07 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2127

Amount of Each Disbursement this Period: 24.75

Memo Item

**B. RAISE THE MONEY, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 09 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2128C

Amount of Each Disbursement this Period: 12.50

Memo Item

**C. RAISE THE MONEY, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 26466

City LITTLE ROCK State AR Zip Code 72221

Purpose of Disbursement JFC CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 22 / 2023

FEC Identification Number: C

Transaction ID : SB21B.I2132

Amount of Each Disbursement this Period: 37.50

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 74.75

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Team Hill**

Full Name (Last, First, Middle Initial)  
**A. RAISE THE MONEY, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		09		2023

Mailing Address P.O. BOX 26466

City  
LITTLE ROCK

State  
AR

Zip Code  
72221

FEC Identification Number

**C**

**Transaction ID : SB21B.I2139I**

Amount of Each Disbursement this Period

49.25

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)  
**B. RAISE THE MONEY, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2023

Mailing Address P.O. BOX 26466

City  
LITTLE ROCK

State  
AR

Zip Code  
72221

FEC Identification Number

**C**

**Transaction ID : SB21B.I2144I**

Amount of Each Disbursement this Period

24.75

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

Full Name (Last, First, Middle Initial)  
**C. RAISE THE MONEY, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2023

Mailing Address P.O. BOX 26466

City  
LITTLE ROCK

State  
AR

Zip Code  
72221

FEC Identification Number

**C**

**Transaction ID : SB21B.I2144I**

Amount of Each Disbursement this Period

49.50

Purpose of Disbursement  
JFC CC TRANSACTION FEES

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Memo Item

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

123.50

**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)  
**Team Hill**

Full Name (Last, First, Middle Initial)

### A. SIMMONS BANK

Mailing Address 501 MAIN STREET

City PINE BLUFF State AR Zip Code 71601

Purpose of Disbursement  
JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 05 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I2121  
Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. SIMMONS BANK

Mailing Address 501 MAIN STREET

City PINE BLUFF State AR Zip Code 71601

Purpose of Disbursement  
JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 05 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I2126  
Amount of Each Disbursement this Period

25.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. SIMMONS BANK

Mailing Address 501 MAIN STREET

City PINE BLUFF State AR Zip Code 71601

Purpose of Disbursement  
JFC BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2023

FEC Identification Number

C

Transaction ID : SB21B.I2139  
Amount of Each Disbursement this Period

25.00

Memo Item

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

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

75.00

3508.25

**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 checked="" 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)  
**Team Hill**

**A. FRENCH HILL FOR ARKANSAS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name  
**HILL, JAMES, , ,**

Office Sought:  House  Senate  President  
State: AR District: 02

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 30 / 2023

FEC Identification Number: C00551275  
Transaction ID : SB22.I21462  
Amount of Each Disbursement this Period: 30840.77

Memo Item

**B. FRENCH HILL FOR ARKANSAS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7841

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement  
REIMBURSEMENT OF TRANSFER FOR JFC EXPENSES

Candidate Name  
**HILL, JAMES, , ,**

Office Sought:  House  Senate  President  
State: AR District: 02

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 30 / 2023

FEC Identification Number: C00551275  
Transaction ID : SB22.I21465  
Amount of Each Disbursement this Period: 40000.00

Memo Item

**C. IN THE ARENA PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7244

City LITTLE ROCK State AR Zip Code 72217

Purpose of Disbursement  
TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 06 / 30 / 2023

FEC Identification Number: C00623512  
Transaction ID : SB22.I21463  
Amount of Each Disbursement this Period: 3573.63

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 74414.40

**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 type="checkbox"/> 21b	<input checked="" 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)  
**Team Hill**

**A. NRCC**

Full Name (Last, First, Middle Initial)

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement TRANSFER OF NET JFC FUNDS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2023

FEC Identification Number: C C00075820

Transaction ID : SB22.I21464

Amount of Each Disbursement this Period: 18511.40

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	18511.40
<b>TOTAL</b> This Period (last page this line number only).....▶	92925.80