



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Reform Government**

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"/>		315017.44
(b) Cash on Hand at Beginning of Reporting Period.....	304602.10	
(c) Total Receipts (from Line 19) .....	0.00	0.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	304602.10	315017.44
7. Total Disbursements (from Line 31).....	31857.36	42272.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	272744.74	272744.74
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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

**Reform Government**

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

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).....	0.00	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
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)).....▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0.00	0.00

**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 .....	857.36	1272.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	857.36	1272.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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).....	31000.00	41000.00
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)) ..	31857.36	42272.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31857.36	42272.70

**DETAILED SUMMARY PAGE**  
of Disbursements

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<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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	857.36	1272.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	857.36	1272.70

**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

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)  
**Reform Government**

Full Name (Last, First, Middle Initial) <b>A. Robert Watkins &amp; Company, P.A.</b>		Date of Disbursement MM / DD / YYYY 09 / 17 / 2019	
Mailing Address 610 S. Boulevard		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4601</b> Amount of Each Disbursement this Period [ ] 572.50	
City Tampa	State FL	Zip Code 33606	Category/ Type [ ]
Purpose of Disbursement accounting services		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) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Robert Watkins &amp; Company, P.A.</b>		Date of Disbursement MM / DD / YYYY 10 / 23 / 2019	
Mailing Address 610 S. Boulevard		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4602</b> Amount of Each Disbursement this Period [ ] 109.89	
City Tampa	State FL	Zip Code 33606	Category/ Type [ ]
Purpose of Disbursement accounting services		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) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Robert Watkins &amp; Company, P.A.</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2019	
Mailing Address 610 S. Boulevard		FEC Identification Number C [ ] <b>Transaction ID : SB21B.4604</b> Amount of Each Disbursement this Period [ ] 65.00	
City Tampa	State FL	Zip Code 33606	Category/ Type [ ]
Purpose of Disbursement accounting services		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) ▼	Memo Item <input type="checkbox"/>	
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 747.39
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reform Government**

**A. Concerns of Police Survivors**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P. O. Box 3199

M M M	/	D D D	/	Y Y Y Y Y
12		02		2019

City  
Camdenton

State  
MT

Zip Code  
65020

FEC Identification Number

Purpose of Disbursement  
non-federal contribution

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB29.4610**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

5000.00
---------

State: District:

Memo Item

**B. Eagle Eye PAC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P. O. Box 101654

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

City  
Cape Coral

State  
FL

Zip Code  
33910

FEC Identification Number

Purpose of Disbursement  
non-federal contribution

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB29.4599**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

5000.00
---------

State: District:

Memo Item

**C. Mike Giallombardo Campaign**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P. O. Box 100594

M M M	/	D D D	/	Y Y Y Y Y
07		10		2019

City  
Cape Coral

State  
FL

Zip Code  
33904

FEC Identification Number

Purpose of Disbursement  
non-federal contribution

C
---

Candidate Name

Category/  
Type

**Transaction ID : SB29.4595**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

1000.00
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State: District:

Memo Item

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

11000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reform Government**

Full Name (Last, First, Middle Initial) <b>A. Proven Leadership for Miami-Dade County PC</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2019
Mailing Address 10200 N.W. 25th Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.4597</b> Amount of Each Disbursement this Period 5000.00
City Miami	State FL	Zip Code 33172
Purpose of Disbursement non-federal contribution		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>B. Proven Leadership for Miami-Dade County PC</b>		Date of Disbursement MM / DD / YYYY 11 / 12 / 2019
Mailing Address 10200 N.W. 25th Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.4603</b> Amount of Each Disbursement this Period 5000.00
City Miami	State FL	Zip Code 33172
Purpose of Disbursement contribution		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>C. The Better Hour Foundation</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2019
Mailing Address P. O. Box 10462		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.4613</b> Amount of Each Disbursement this Period 10000.00
City Raleigh	State NC	Zip Code 27605
Purpose of Disbursement contribution		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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	20000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	31000.00