

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Freedom for All Americans

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>	<input type="text" value="42.37"/>	<input type="text" value="42.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15155.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="15700.33"/>	<input type="text" value="126317.10"/>
(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="30856.10"/>	<input type="text" value="126359.47"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="19798.98"/>	<input type="text" value="115302.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11057.12"/>	<input type="text" value="11057.12"/>
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="95580.73"/>	

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

Freedom for All Americans

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	3000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	3000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	20000.00
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	17.10
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	15700.33	103300.00
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)).....▶	15700.33	126317.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	15700.33	126317.10

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	19798.98	115302.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	19798.98	115302.35
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).....	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)) ..	19798.98	115302.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19798.98	115302.35

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	3000.00
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	3000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	19798.98	115302.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	17.10
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19798.98	115285.25

**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 11
<input 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 checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Freedom for All Americans

A. Conservative Connector LLC

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

Mailing Address PO Box 952

City Grandville	State MI	Zip Code 49468
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
103300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		05		2018

Transaction ID : SA17.4185

Amount of Each Receipt this Period
15700.33

Memo Item
LRI - Usual & Normal

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	15700.33
TOTAL This Period (last page this line number only).....▶	15700.33

**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)
Freedom for All Americans

Full Name (Last, First, Middle Initial)

A. Chain Bridge Bank

Mailing Address 1445A Laughlin Ave

City McLean State VA Zip Code 22101

Purpose of Disbursement
PAC 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
09 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4189
Amount of Each Disbursement this Period
12.09

Memo Item

Full Name (Last, First, Middle Initial)

B. Professional Data Services Inc.

Mailing Address 824 S. Milledge Ave. Ste. 101

City Athens State GA Zip Code 30605

Purpose of Disbursement
PAC Compliance Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4188
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Victory Enterprises

Mailing Address 5200 SW 30th Street

City Davenport State IA Zip Code 52802

Purpose of Disbursement
PAC Online Store Sales/Printing/Collateral

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4186
Amount of Each Disbursement this Period
18786.89

Memo Item

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

19798.98

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

19798.98

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Freedom for All Americans

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bedingfield, Eric, , ,			Nature of Debt (Purpose): Campaign Strategy Consulting
Mailing Address 945 Cooley Bridge Road			
City Belton	State SC	Zip Code 29627	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : SD10.4111	
Amount Incurred This Period 0.00	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 Caplin & Drysdale			Nature of Debt (Purpose): PAC Legal Fees
Mailing Address 1 Thomas Circle NW Ste 1100			
City Washington	State DC	Zip Code 20005	

Outstanding Balance Beginning This Period 6862.50	Transaction ID : SD10.4165	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6862.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor C Street Properties LLC			Nature of Debt (Purpose): Office Rent
Mailing Address 190 Monroe Ave Ste 500			
City Grand Rapids	State MI	Zip Code 49503	

Outstanding Balance Beginning This Period 12196.39	Transaction ID : SD10.4107	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12196.39

1) SUBTOTALS This Period This Page (optional)..... ▶	21558.89
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Freedom for All Americans

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Forward Strategy Partners			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 6211 Burnham Place			
City Prospect	State KY	Zip Code 40059	

Outstanding Balance Beginning This Period 2395.00	Transaction ID : SD10.4113	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2395.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hartford Technology Rental			Nature of Debt (Purpose): Office Equipment Rental
Mailing Address 7806 Braygreen Road #101			
City Laurel	State MD	Zip Code 20707	

Outstanding Balance Beginning This Period 3962.45	Transaction ID : SD10.4115	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3962.45

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor i360, LLC			Nature of Debt (Purpose): Telemarketing
Mailing Address PO Box 37046			
City Baltimore	State MD	Zip Code 21297	

Outstanding Balance Beginning This Period 22370.13	Transaction ID : SD10.4117	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22370.13

1) SUBTOTALS This Period This Page (optional)..... ▶	28727.58
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Freedom for All Americans

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paramount Communications Inc.		Nature of Debt (Purpose): E-Marketing	
Mailing Address 525-K East Market St. Ste. 114			
City Leesburg	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 26045.68	Transaction ID : SD10.4121	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 26045.68

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Primary Data Solutions		Nature of Debt (Purpose): Data Work	
Mailing Address 6983 Conservation Drive			
City Springfield	State VA	Zip Code 22153	

Outstanding Balance Beginning This Period 3980.46	Transaction ID : SD10.4123	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3980.46

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPT Strategies		Nature of Debt (Purpose): Campaign Strategy Consulting	
Mailing Address PO Box 31403			
City Charleston	State SC	Zip Code 29417	

Outstanding Balance Beginning This Period 5000.00	Transaction ID : SD10.4128	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

1) SUBTOTALS This Period This Page (optional)..... ▶	35026.14
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Freedom for All Americans

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Victory Enterprises			Nature of Debt (Purpose): Online Store Sales/Printing/Collateral
Mailing Address 5200 SW 30th Street			
City Davenport	State IA	Zip Code 52802	

Outstanding Balance Beginning This Period <input type="text" value="29055.01"/>	Transaction ID : SD10.4130	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="18786.89"/>	Outstanding Balance at Close of This Period <input type="text" value="10268.12"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

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

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="10268.12"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="95580.73"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="95580.73"/>