

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**
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

ADDRESS (number and street) **8444 COUNTY RD M**
Check if different than previously reported. (ACC) **Fredonia WI 53021**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00622472 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 / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2017 through / / 2017

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

Signature of Treasurer Piaro, Robert, , , [Electronically Filed] Date / / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

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="2017"/>	<input type="text" value="156.05"/>	<input type="text" value="156.05"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="156.05"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="96368.12"/>	<input type="text" value="96368.12"/>
(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="96524.17"/>	<input type="text" value="96524.17"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="74247.45"/>	<input type="text" value="74247.45"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22276.72"/>	<input type="text" value="22276.72"/>
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="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

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Report Covering the Period: From: 01 / 01 / 2017 To: 06 / 30 / 2017

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).....	3200.00	3200.00
(ii) Unitemized	93168.12	93168.12
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	96368.12	96368.12
(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)	96368.12	96368.12
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)).....▶	96368.12	96368.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	96368.12	96368.12

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	70247.45	70247.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	70247.45	70247.45
22. Transfers to Affiliated/Other Party Committees.....	4000.00	4000.00
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)) ..	74247.45	74247.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74247.45	74247.45

DETAILED SUMMARY PAGE
of Disbursements

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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)	96368.12	96368.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	96368.12	96368.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	70247.45	70247.45
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	70247.45	70247.45

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

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

FOR LINE NUMBER: PAGE 6 OF 63
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. ANDERSON, CHRISTIANSON J., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 849
 City WILLISTON State ND Zip Code 58802
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 03 / 27 / 2017
Transaction ID : SA11AI-2561343
 Amount of Each Receipt this Period 200.00
 Memo Item

B. ARRINGTON, MARJORIE F., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10607 HILLPOINT DR
 City DALLAS State TX Zip Code 75238
 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 ▼ 300.00

Date of Receipt 02 / 16 / 2017
Transaction ID : SA11AI-4118
 Amount of Each Receipt this Period 300.00
 Memo Item

C. BELLE, RON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2603 ATHENA DR
 City TROY State MI Zip Code 48083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIREE Occupation (for Individual) RETIREE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 13 / 2017
Transaction ID : SA11AI-2562321
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BELT, MARY JANE, , ,

Mailing Address 43 TOWN PATH

City GLEN COVE	State NY	Zip Code 11542
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2017

Transaction ID : SA11AI-2558581

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 43 TOWN PATH

City GLEN COVE	State NY	Zip Code 11542
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	28	/	2017

Transaction ID : SA11AI-2565419

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 9826 HASTY AVE

City DOWNEY	State CA	Zip Code 90240
----------------	-------------	-------------------

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 ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2017

Transaction ID : SA11AI-2949927

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	325.00
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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. BROWN, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9826 HASTY AVE
 City DOWNEY State CA Zip Code 90240
 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 ▼ 375.00

Date of Receipt **04 / 24 / 2017**
Transaction ID : SA11AI.4116
 Amount of Each Receipt this Period 125.00
 Memo Item

B. BROWN, ELEANOR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9826 HASTY AVE
 City DOWNEY State CA Zip Code 90240
 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 ▼ 375.00

Date of Receipt **05 / 31 / 2017**
Transaction ID : SA11AI.4117
 Amount of Each Receipt this Period 125.00
 Memo Item

C. HALEY, KATHRYN E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 429 COUNTY ROAD 2802
 City CLEVELAND State TX Zip Code 77327
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOLUTIONS IN SIGHT Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **03 / 20 / 2017**
Transaction ID : SA11AI-2560887
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. KINCAID, ELMER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 9
 City THORN HILL State TN Zip Code 37881
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIREE Occupation (for Individual) RETIREE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **04 / 26 / 2017**
Transaction ID : SA11AI-2562945
 Amount of Each Receipt this Period 200.00
 Memo Item

B. LEVERANT, DIRK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11435 N 73RD WAY
 City SCOTTSDALE State AZ Zip Code 85260
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **05 / 04 / 2017**
Transaction ID : SA11AI-2563447
 Amount of Each Receipt this Period 200.00
 Memo Item

C. MACKEY, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 WOODLEY RD
 City MONETA State VA Zip Code 24121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt **02 / 08 / 2017**
Transaction ID : SA11AI-2558101
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. MACKEY, JUDITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 WOODLEY RD
 City MONETA State VA Zip Code 24121
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 06 / 27 / 2017
Transaction ID : SA11AI-2565283
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCCARTHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 05 / 2017
Transaction ID : SA11AI-2561887
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCCARTHY, PATRICK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 47802 270TH ST
 City SIOUX FALLS State SD Zip Code 57108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 04 / 10 / 2017
Transaction ID : SA11AI-2561979
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
MCGARRY, JAMES J, , ,

Mailing Address 1600 GREEN RIDGE ST

City DUNMORE	State PA	Zip Code 18509
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		09		2017

Transaction ID : SA11AI-2558179

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address 1600 GREEN RIDGE ST

City DUNMORE	State PA	Zip Code 18509
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2017

Transaction ID : SA11AI-2565215

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 1600 GREEN RIDGE ST

City DUNMORE	State PA	Zip Code 18509
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2017

Transaction ID : SA11AI.4123

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
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"/> 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. NANFREDI, TIAMARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 WHITEHALL POND
 City MYSTIC State CT Zip Code 06355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **02 / 09 / 2017**
Transaction ID : SA11AI-2558219
 Amount of Each Receipt this Period 100.00
 Memo Item

B. NANFREDI, TIAMARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13 WHITEHALL POND
 City MYSTIC State CT Zip Code 06355
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **06 / 15 / 2017**
Transaction ID : SA11AI-4126
 Amount of Each Receipt this Period 150.00
 Memo Item

C. STEGMILLER, DAVID J, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3950 LYON DR
 City COLUMBUS State OH Zip Code 43220
 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 ▼ 200.00

Date of Receipt **02 / 22 / 2017**
Transaction ID : SA11AI-2558991
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 13 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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TORREALBA, FRANKLIN, , ,

Mailing Address 5747 N ANDREWS WAY

City FT LAUDERDALE	State FL	Zip Code 33309
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) 300 ENGINEERING GROUP PA	Occupation (for Individual) Best Efforts
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		17		2017

Transaction ID : SA11AI-2563779

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

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).....	200.00
TOTAL This Period (last page this line number only).....	3200.00

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)

Form for line numbers: 21b (checked), 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b

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NAME OF COMMITTEE (In Full)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Form entry A: Bartlett, Joshua, , , Date of Disbursement: 02/21/2017, FEC Identification Number: C, Transaction ID: SB21B-94849, Amount: 475.39

Form entry B: Bartlett, Joshua, , , Date of Disbursement: 02/27/2017, FEC Identification Number: C, Transaction ID: SB21B-94861, Amount: 393.75

Form entry C: Bartlett, Joshua, , , Date of Disbursement: 03/09/2017, FEC Identification Number: C, Transaction ID: SB21B-94881, Amount: 357.89

SUBTOTAL of Disbursements This Page (optional) 1227.03
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Bartlett, Joshua, , ,

Mailing Address 1608 Mackinac Ave

City
South Milwaukee

State
WI

Zip Code
53172

Purpose of Disbursement
Payroll

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94887
Amount of Each Disbursement this Period
[REDACTED] 260.69

Memo Item

Full Name (Last, First, Middle Initial)

B. Bartlett, Joshua, , ,

Mailing Address 1608 Mackinac Ave

City
South Milwaukee

State
WI

Zip Code
53172

Purpose of Disbursement
Payroll

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94899
Amount of Each Disbursement this Period
[REDACTED] 285.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Clemins, John J, , ,

Mailing Address 2242 S Winchester St

City
Milwaukee

State
WI

Zip Code
53207

Purpose of Disbursement
Payroll

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	1	7

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-9486:
Amount of Each Disbursement this Period
[REDACTED] 415.92

Memo Item

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

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

[REDACTED]	962.55
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[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. Clemins, John J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2242 S Winchester St

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 27 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94865

Amount of Each Disbursement this Period: 358.69

Memo Item

B. Clemins, John J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2242 S Winchester St

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 06 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94871

Amount of Each Disbursement this Period: 347.00

Memo Item

C. Clemins, John J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2242 S Winchester St

City Milwaukee State WI Zip Code 53207

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94888

Amount of Each Disbursement this Period: 282.92

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 988.61

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94855
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94873
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-9488:
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94895
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94905
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Johnson, Ronald L, , ,

Mailing Address 6550 N 80th Street
Apt 219

City Milwaukee State WI Zip Code 53223

Purpose of Disbursement Payroll

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94911
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Mroz, Josh, , ,

Mailing Address 455 N 39th St
Apt 3

City Milwaukee State WI Zip Code 53208

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94851
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mroz, Josh, , ,

Mailing Address 455 N 39th St
Apt 3

City Milwaukee State WI Zip Code 53208

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94867
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mroz, Josh, , ,

Mailing Address 455 N 39th St
Apt 3

City Milwaukee State WI Zip Code 53208

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94871
Amount of Each Disbursement this Period

Memo Item

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

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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial) A. Mroz, Josh, , ,		Date of Disbursement MM / DD / YYYY 03 / 14 / 2017	
Mailing Address 455 N 39th St Apt 3		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94893	
City Milwaukee	State WI	Zip Code 53208	Amount of Each Disbursement this Period [REDACTED] 332.34
Purpose of Disbursement Payroll		Category/Type 001	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) B. Mroz, Josh, , ,		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 455 N 39th St Apt 3		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94903	
City Milwaukee	State WI	Zip Code 53208	Amount of Each Disbursement this Period [REDACTED] 381.69
Purpose of Disbursement Payroll		Category/Type 001	Memo Item <input type="checkbox"/>
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:			

Full Name (Last, First, Middle Initial) C. Mroz, Josh, , ,		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 455 N 39th St Apt 3		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94903	
City Milwaukee	State WI	Zip Code 53208	Amount of Each Disbursement this Period [REDACTED] 294.39
Purpose of Disbursement Payroll		Category/Type 001	Memo Item <input type="checkbox"/>
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 1008.42
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Mroz, Josh, , ,

Mailing Address 455 N 39th St
Apt 3

City Milwaukee State WI Zip Code 53208

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94915
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Mroz, Josh, , ,

Mailing Address 455 N 39th St
Apt 3

City Milwaukee State WI Zip Code 53208

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94919
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee State WI Zip Code 53215

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94851
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94857
Amount of Each Disbursement this Period
271.79

Memo Item

Full Name (Last, First, Middle Initial)

B. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 06 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94875
Amount of Each Disbursement this Period
36.94

Memo Item

Full Name (Last, First, Middle Initial)

C. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2017

FEC Identification Number

C
Transaction ID : SB21B-9488!
Amount of Each Disbursement this Period
418.31

Memo Item

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

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

727.04

**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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	7			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94897

Amount of Each Disbursement this Period

[REDACTED] 389.99

Memo Item

Full Name (Last, First, Middle Initial)

B. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	4			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94907

Amount of Each Disbursement this Period

[REDACTED] 232.30

Memo Item

Full Name (Last, First, Middle Initial)

C. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	3			2	0	1	7		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94911

Amount of Each Disbursement this Period

[REDACTED] 160.61

Memo Item

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

[REDACTED]	782.90
------------	--------

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

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 10 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94917
Amount of Each Disbursement this Period
258.73

Memo Item

Full Name (Last, First, Middle Initial)

B. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94921
Amount of Each Disbursement this Period
175.31

Memo Item

Full Name (Last, First, Middle Initial)

C. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2017

FEC Identification Number

C
Transaction ID : SB21B-9492:
Amount of Each Disbursement this Period
356.01

Memo Item

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

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

790.05

**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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial) A. Nowak, Justin, , ,			Date of Disbursement MM / DD / YYYY 04 / 28 / 2017	
Mailing Address 2038 S 30th Street				
City Milwaukee	State WI	Zip Code 53215	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21B-94925	
Candidate Name			Amount of Each Disbursement this Period 439.43	
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. Nowak, Justin, , ,			Date of Disbursement MM / DD / YYYY 05 / 15 / 2017	
Mailing Address 2038 S 30th Street				
City Milwaukee	State WI	Zip Code 53215	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21B-94927	
Candidate Name			Amount of Each Disbursement this Period 169.13	
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) C. Nowak, Justin, , ,			Date of Disbursement MM / DD / YYYY 05 / 22 / 2017	
Mailing Address 2038 S 30th Street				
City Milwaukee	State WI	Zip Code 53215	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21B-94925	
Candidate Name			Amount of Each Disbursement this Period 372.69	
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:				

SUBTOTAL of Disbursements This Page (optional).....▶	981.25
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5				3	0		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94931
 Amount of Each Disbursement this Period
 [REDACTED] 336.30

Memo Item

Full Name (Last, First, Middle Initial)

B. Nowak, Justin, , ,

Mailing Address 2038 S 30th Street

City Milwaukee

State WI

Zip Code 53215

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6				0	5		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94933
 Amount of Each Disbursement this Period
 [REDACTED] 89.69

Memo Item

Full Name (Last, First, Middle Initial)

C. Petrovich, Michael V, , ,

Mailing Address 6869 Crocus Crt Apt 2

City Greendale

State WI

Zip Code 53129

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				2	1		2	0	1	7		

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-9485:
 Amount of Each Disbursement this Period
 [REDACTED] 389.85

Memo Item

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

8	1	5	.	8	4
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TOTAL This Period (last page this line number only)..... ▶

8	1	5	.	8	4
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial) A. Petrovich, Michael V, , ,			Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address 6869 Crocus Crt Apt 2				
City Greendale	State WI	Zip Code 53129		
Purpose of Disbursement Payroll		Category/ Type 001	FEC Identification Number C Transaction ID : SB21B-94869 Amount of Each Disbursement this Period 450.38	
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. Petrovich, Michael V, , ,			Date of Disbursement MM / DD / YYYY 03 / 06 / 2017	
Mailing Address 6869 Crocus Crt Apt 2				
City Greendale	State WI	Zip Code 53129		
Purpose of Disbursement Payroll		Category/ Type 001	FEC Identification Number C Transaction ID : SB21B-94877 Amount of Each Disbursement this Period 360.38	
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. Petrovich, Michael V, , ,			Date of Disbursement MM / DD / YYYY 03 / 13 / 2017	
Mailing Address 6869 Crocus Crt Apt 2				
City Greendale	State WI	Zip Code 53129		
Purpose of Disbursement Payroll		Category/ Type 001	FEC Identification Number C Transaction ID : SB21B-94891 Amount of Each Disbursement this Period 349.47	
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)..... ▶			1160.23	
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Petrovich, Michael V, , ,

Mailing Address 6869 Crocus Crt
Apt 2

City Greendale State WI Zip Code 53129

Purpose of Disbursement Payroll

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94901
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94667
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94666
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		24		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94697

Amount of Each Disbursement this Period

[REDACTED] 56.43

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees Category/Type 001

Candidate Name

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

Full Name (Last, First, Middle Initial)

B. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94699

Amount of Each Disbursement this Period

[REDACTED] 623.58

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees Category/Type 001

Candidate Name

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

Full Name (Last, First, Middle Initial)

C. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		03		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-9470

Amount of Each Disbursement this Period

[REDACTED] 56.43

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees Category/Type 001

Candidate Name

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

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

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

[REDACTED] 736.44

[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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94635

Amount of Each Disbursement this Period

[REDACTED] 617.63

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94703

Amount of Each Disbursement this Period

[REDACTED] 56.43

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94635

Amount of Each Disbursement this Period

[REDACTED] 704.63

Memo Item

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

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

[REDACTED] 1378.69

[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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 17 / 2017

FEC Identification Number C

Transaction ID : SB21B-94705

Amount of Each Disbursement this Period 56.43

Memo Item

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 23 / 2017

FEC Identification Number C

Transaction ID : SB21B-94671

Amount of Each Disbursement this Period 1030.75

Memo Item

C. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 23 / 2017

FEC Identification Number C

Transaction ID : SB21B-94631

Amount of Each Disbursement this Period 643.38

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1730.56

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94707
Amount of Each Disbursement this Period
[REDACTED] 56.43

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94673
Amount of Each Disbursement this Period
[REDACTED] 657.96

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2017

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B-94641
Amount of Each Disbursement this Period
[REDACTED] 372.72

Memo Item

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

[REDACTED]	1087.11
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TOTAL This Period (last page this line number only)..... ▶

[REDACTED]	
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2017

FEC Identification Number

C

Transaction ID : SB21B-94709

Amount of Each Disbursement this Period

56.43

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	06	/	2017

FEC Identification Number

C

Transaction ID : SB21B-94675

Amount of Each Disbursement this Period

1150.33

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	06	/	2017

FEC Identification Number

C

Transaction ID : SB21B-9464:

Amount of Each Disbursement this Period

511.53

Memo Item

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

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

1718.29

**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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 07 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94711
Amount of Each Disbursement this Period
56.43

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 13 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94677
Amount of Each Disbursement this Period
646.89

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
04 / 13 / 2017

FEC Identification Number

C
Transaction ID : SB21B-9464!
Amount of Each Disbursement this Period
297.26

Memo Item

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

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

1000.58

**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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94713

Amount of Each Disbursement this Period

56.43

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94679

Amount of Each Disbursement this Period

1032.34

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94647

Amount of Each Disbursement this Period

532.92

Memo Item

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

1621.69

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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial) A. ADP		Date of Disbursement MM / DD / YYYY 04 / 21 / 2017
Mailing Address 100 NorthWest Point Blvd		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94715 Amount of Each Disbursement this Period 77.22
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Processing Fees		Category/Type 001
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. ADP		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address 100 NorthWest Point Blvd		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94681 Amount of Each Disbursement this Period 814.13
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Processing Fees		Category/Type 001
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. ADP		Date of Disbursement MM / DD / YYYY 04 / 27 / 2017
Mailing Address 100 NorthWest Point Blvd		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94645 Amount of Each Disbursement this Period 443.95
City Elk Grove Village	State IL	Zip Code 60007
Purpose of Disbursement Payroll Processing Fees		Category/Type 001
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).....▶	1335.30
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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94717

Amount of Each Disbursement this Period: 52.22

Memo Item

B. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 04 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94651

Amount of Each Disbursement this Period: 288.65

Memo Item

C. ADP

Full Name (Last, First, Middle Initial)

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 05 / 2017

FEC Identification Number: C

Transaction ID : SB21B-94718

Amount of Each Disbursement this Period: 54.33

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	395.20
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-94683
Amount of Each Disbursement this Period

751.44

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees 001 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. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		11		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-94653
Amount of Each Disbursement this Period

319.81

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees 001 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. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-94721
Amount of Each Disbursement this Period

47.54

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees 001 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)..... ▶

1118.79

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94685
Amount of Each Disbursement this Period
597.49

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94655
Amount of Each Disbursement this Period
348.58

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 19 / 2017

FEC Identification Number

C
Transaction ID : SB21B-9472:
Amount of Each Disbursement this Period
52.22

Memo Item

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

998.29

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B-94687
Amount of Each Disbursement this Period
[] 866.36

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B-94657
Amount of Each Disbursement this Period
[] 410.20

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	7

FEC Identification Number

C []
Transaction ID : SB21B-94688
Amount of Each Disbursement this Period
[] 630.72

Memo Item

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

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

1	9	0	7	.	2	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		01		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-94659

Amount of Each Disbursement this Period

252.86

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		02		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-94725

Amount of Each Disbursement this Period

52.22

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. ADP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		08		2017

Mailing Address 100 NorthWest Point Blvd

FEC Identification Number

C

Transaction ID : SB21B-9463:

Amount of Each Disbursement this Period

592.59

Memo Item

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

897.67

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 08 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94631

Amount of Each Disbursement this Period

210.76

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94727

Amount of Each Disbursement this Period

52.22

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94691

Amount of Each Disbursement this Period

797.64

Memo Item

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

1060.62

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94661

Amount of Each Disbursement this Period

[REDACTED] 326.23

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 16 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94729

Amount of Each Disbursement this Period

[REDACTED] 47.54

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-9469:

Amount of Each Disbursement this Period

[REDACTED] 669.05

Memo Item

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

[REDACTED] 1042.82

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94663

Amount of Each Disbursement this Period

[REDACTED] 251.70

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94731

Amount of Each Disbursement this Period

[REDACTED] 47.54

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP

Mailing Address 100 NorthWest Point Blvd

City
Elk Grove Village

State
IL

Zip Code
60007

Purpose of Disbursement
Payroll Processing Fees

001

Category/
Type

Candidate Name

Office Sought:
 House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-9469!

Amount of Each Disbursement this Period

[REDACTED] 700.11

Memo Item

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

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

[REDACTED] 999.35

[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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 29 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94665
Amount of Each Disbursement this Period
269.21

Memo Item

Full Name (Last, First, Middle Initial)

B. ADP

Mailing Address 100 NorthWest Point Blvd

City Elk Grove Village State IL Zip Code 60007

Purpose of Disbursement Payroll Processing Fees

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94733
Amount of Each Disbursement this Period
47.54

Memo Item

Full Name (Last, First, Middle Initial)

C. Fox, O'Neill, Shannon S.C.

Mailing Address 622 N Water St. Suite 500

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement Legal

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2017

FEC Identification Number

C
Transaction ID : SB21B-9474!
Amount of Each Disbursement this Period
795.50

Memo Item

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

1112.25

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Fox, O'Neill, Shannon S.C.

Mailing Address 622 N Water St.
Suite 500

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement Legal
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number
C
Transaction ID : SB21B-95241
Amount of Each Disbursement this Period
791.00

Memo Item Credit Card Purchase

Full Name (Last, First, Middle Initial)

B. MacGillis Agency, Inc.

Mailing Address W3934 County Road H

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Workmans Comp Insurance
Candidate Name
Category/Type 001

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

Date of Disbursement
MM / DD / YYYY
05 / 09 / 2017

FEC Identification Number
C
Transaction ID : SB21B-94751
Amount of Each Disbursement this Period
531.00

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature
Candidate Name
Category/Type 006

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

Date of Disbursement
MM / DD / YYYY
02 / 03 / 2017

FEC Identification Number
C
Transaction ID : SB21B-94751
Amount of Each Disbursement this Period
866.40

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... 1397.40

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B-94755
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B-94757
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB21B-94755
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94761
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94763
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94761
 Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

006

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94767

Amount of Each Disbursement this Period

278.26

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

006

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 14 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94769

Amount of Each Disbursement this Period

239.47

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

006

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 21 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94771

Amount of Each Disbursement this Period

238.88

Memo Item

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

756.61

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94773
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94775
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94777
 Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94779
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94781
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Campaign Literature

Category/Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-9478:
 Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 09 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94785
Amount of Each Disbursement this Period
138.44

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 16 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94787
Amount of Each Disbursement this Period
198.59

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 23 / 2017

FEC Identification Number

C
Transaction ID : SB21B-94788
Amount of Each Disbursement this Period
157.24

Memo Item

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

494.27

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. North American Marketing Solutions Inc

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Campaign Literature

006

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94791

Amount of Each Disbursement this Period

120.76

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94793

Amount of Each Disbursement this Period

31.95

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2017

FEC Identification Number

C

Transaction ID : SB21B-94791

Amount of Each Disbursement this Period

13.95

Memo Item

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

166.66

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94797

Amount of Each Disbursement this Period

[REDACTED] 36.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94799

Amount of Each Disbursement this Period

[REDACTED] 38.95

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94801

Amount of Each Disbursement this Period

[REDACTED] 31.95

Memo Item

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

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

[REDACTED] 106.90

[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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94807

Amount of Each Disbursement this Period

[REDACTED]	120.31
------------	--------

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94805

Amount of Each Disbursement this Period

[REDACTED]	47.86
------------	-------

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-9480:

Amount of Each Disbursement this Period

[REDACTED]	31.95
------------	-------

Memo Item

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

[REDACTED]	200.12
------------	--------

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	21	/	2017

FEC Identification Number

C

Transaction ID : SB21B-94809

Amount of Each Disbursement this Period

36.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	03	/	2017

FEC Identification Number

C

Transaction ID : SB21B-94811

Amount of Each Disbursement this Period

165.97

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	12	/	2017

FEC Identification Number

C

Transaction ID : SB21B-9481:

Amount of Each Disbursement this Period

7.50

Memo Item

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

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

209.47

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	14	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-94815
Amount of Each Disbursement this Period
[] 3185.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	25	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-94817
Amount of Each Disbursement this Period
[] 25.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-94815
Amount of Each Disbursement this Period
[] 150.70

Memo Item

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

[] 3360.70

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

[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial) A. PNC Bank		Date of Disbursement MM / DD / YYYY 05 / 04 / 2017
Mailing Address PO Box 609		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94821 Amount of Each Disbursement this Period [REDACTED] 701.88
City Pittsburgh	State PA	Zip Code 15230-9738
Purpose of Disbursement Bank Fee/Bank Charge		Category/Type 001
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. PNC Bank		Date of Disbursement MM / DD / YYYY 05 / 08 / 2017
Mailing Address PO Box 609		FEC Identification Number C [REDACTED] Transaction ID : SB21B-94823 Amount of Each Disbursement this Period [REDACTED] 50.00
City Pittsburgh	State PA	Zip Code 15230-9738
Purpose of Disbursement Bank Fee/Bank Charge		Category/Type 001
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. PNC Bank		Date of Disbursement MM / DD / YYYY 05 / 15 / 2017
Mailing Address PO Box 856177		FEC Identification Number C [REDACTED] Transaction ID : SB21B-95231 Amount of Each Disbursement this Period [REDACTED] 2714.56
City Louisville	State KY	Zip Code 40285
Purpose of Disbursement Credit Card Payment		Category/Type 001
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).....▶	[REDACTED] 3466.44
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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 856177

City Louisville State KY Zip Code 40285

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94833
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94825
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94827
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94829

Amount of Each Disbursement this Period

1	5	0	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230-9738

Purpose of Disbursement
Bank Fee/Bank Charge

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-94831

Amount of Each Disbursement this Period

5	0	0	0
---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. Potawatomi Bingo

Mailing Address 1721 W Canal St

City
Milwaukee

State
WI

Zip Code
53233

Purpose of Disbursement
Event Sponsor

004

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	7

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-9524:

Amount of Each Disbursement this Period

1	0	6	8	.	6	4
---	---	---	---	---	---	---

Credit Card Purchase

Memo Item

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

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

6	5	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Potawatomi Bingo

Mailing Address 1721 W Canal St

City Milwaukee

State WI

Zip Code 53233

Purpose of Disbursement
Event Sponsor

001
 002
 003
 004
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-95245
Amount of Each Disbursement this Period

Memo Item
Credit Card Purchase

Full Name (Last, First, Middle Initial)

B. Veterans Employee Training Services

Mailing Address 8444 County Rd M

City Fredonia

State WI

Zip Code 53021

Purpose of Disbursement
Payroll assistance

010
 011
 012
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94841
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Veterans Employee Training Services

Mailing Address 8444 County Rd M

City Fredonia

State WI

Zip Code 53021

Purpose of Disbursement
Payroll assistance

010
 011
 012
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B-94831
Amount of Each Disbursement this Period

Memo Item

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

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)

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

Full Name (Last, First, Middle Initial)

A. Veterans Employee Training Services

Mailing Address 8444 County Rd M

City
Fredonia

State
WI

Zip Code
53021

Purpose of Disbursement
Payroll assistance

012

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	10	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-94843
Amount of Each Disbursement this Period
[] 4200.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Veterans Employee Training Services

Mailing Address 8444 County Rd M

City
Fredonia

State
WI

Zip Code
53021

Purpose of Disbursement
Payroll assistance

012

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	17	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-94847
Amount of Each Disbursement this Period
[] 4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Veterans Employee Training Services

Mailing Address 8444 County Rd M

City
Fredonia

State
WI

Zip Code
53021

Purpose of Disbursement
Payroll assistance

012

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	13	/	2017

FEC Identification Number

C []
Transaction ID : SB21B-9484!
Amount of Each Disbursement this Period
[] 4000.00

Memo Item

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

12200.00

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

69848.20

**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)
ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

A. STANDING BY VETERANS PAC INC

Full Name (Last, First, Middle Initial)
Mailing Address 8444 County Rd M

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Payroll assistance
Candidate Name STANDING BY VETERANS PAC INC
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement 03 / 06 / 2017

FEC Identification Number C C00622464
Transaction ID : SB22-94835
Amount of Each Disbursement this Period 1000.00

Memo Item

B. STANDING BY VETERANS PAC INC

Full Name (Last, First, Middle Initial)
Mailing Address 8444 County Rd M

City Fredonia State WI Zip Code 53021

Purpose of Disbursement Payroll assistance
Candidate Name STANDING BY VETERANS PAC INC
Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement 06 / 16 / 2017

FEC Identification Number C C00622464
Transaction ID : SB22-94837
Amount of Each Disbursement this Period 3000.00

Memo Item

C.

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

City State Zip Code

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

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	4000.00
TOTAL This Period (last page this line number only).....▶	4000.00