

**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.

Reclaim America PAC

ADDRESS (number and street)



Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Lisker, Lisa, , ,

Type or Print Name of Treasurer

Signature of Treasurer

*Lisker, Lisa, , ,*

[Electronically Filed]

Date

/  /

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

Office Use Only							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Reclaim America PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="94625.73"/>	<input type="text" value="94625.73"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="177745.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="78000.00"/>	<input type="text" value="501381.07"/>
(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="255745.11"/>	<input type="text" value="596006.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="120161.59"/>	<input type="text" value="460423.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="135583.52"/>	<input type="text" value="135583.52"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
**Reclaim America PAC**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10000.00	124750.00
(ii) Unitemized .....	0.00	290.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10000.00	125040.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	45000.00	332500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	55000.00	457540.00
12. Transfers From Affiliated/Other Party Committees.....	23000.00	43841.07
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)).....▶	78000.00	501381.07
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	78000.00	501381.07

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

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 .....	65161.59	275923.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	65161.59	275923.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	183500.00
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	1000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1000.00
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)) ..	120161.59	460423.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120161.59	460423.28

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	55000.00	457540.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	55000.00	456540.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	65161.59	275923.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	65161.59	275923.28

**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 37  
(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)  
**Reclaim America PAC**

**A. ALIX, JAY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 151 S. OLD WOODWARD AVE. STE. 400  
 City BIRMINGHAM State MI Zip Code 48009-6103  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ALIX PARTNERS Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 09 / 2019  
**Transaction ID : SA11A.1327533**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B. CAREY, ROBERT, , , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6100 BRADLEY BLVD.  
 City BETHESDA State MD Zip Code 20817-3842  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF Occupation (for Individual) POLICY ANALYST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 30 / 2019  
**Transaction ID : SA11A.1328159**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. COHEN, AARON, K., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 13TH STREET, NW 2ND FLOOR  
 City WASHINGTON State DC Zip Code 20005-3950  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITOL COUNSEL Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328892**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 4500.00  
**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 37
	<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)  
**Reclaim America PAC**

**A. LAPINSKI, MATHEW, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4424 45TH ST NW  
 City WASHINGTON State DC Zip Code 20016-2053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROSSROADS STRATEGIES Occupation (for Individual) EVP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328862**  
 Amount of Each Receipt this Period 500.00  
 Memo Item  
**CONTRIBUTION**

**B. ROSSMAN, EMANUEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8000 GREENWICH WOODS DR.  
 City MC LEAN State VA Zip Code 22102-1332  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328863**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item  
**CONTRIBUTION**

**C. SLEMROD, JONATHAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 H ST., NE  
 City WASHINGTON State DC Zip Code 20002-5144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HARBINGER STRATEGIES Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 12 / 18 / 2019  
**Transaction ID : SA11A.1327690**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 37
<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)  
**Reclaim America PAC**

**A. WILEY REIN LLP**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 K. STREET NW

City WASHINGTON	State DC	Zip Code 20006-2304
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2019

**Transaction ID : SA11A.1328875**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

SEE PARTNER MEMOS; SEE ATTRIBUTION BELOW

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

Mailing Address 7405 WINDY HILL CT

City MC LEAN	State VA	Zip Code 22102-2800
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) ATTORNEY
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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
12		31		2019

**Transaction ID : SA11A.1328876**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

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

Mailing Address 1776 K ST NW

City WASHINGTON	State DC	Zip Code 20006-2304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) PARTNER
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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
12		31		2019

**Transaction ID : SA11A.1328884**

Amount of Each Receipt this Period  
200.00

Memo Item  
CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 37
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**Reclaim America PAC**

**A. BROWN, MEGAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9608 CARRIAGE RD  
 City KENSINGTON State MD Zip Code 20895-3618  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328877**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**B. BURNS, CALEB, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K ST NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328885**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**C. DELACOURT, SCOTT, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1527 N. RANDOLPH STREET  
 City ARLINGTON State VA Zip Code 22207-3022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328878**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**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 37
	<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)  
**Reclaim America PAC**

**A. EVANS, CLAIRE, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1776 K STREET NW

City WASHINGTON	State DC	Zip Code 20006-2304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN	Occupation (for Individual) PARTNER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2019

**Transaction ID : SA11A.1328881**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**B. GROSS, DAVID, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8608 BRADLEY BLVD.

City BETHESDA	State MD	Zip Code 20817-2603
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) LAWYER
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2019

**Transaction ID : SA11A.1328889**

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

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

Mailing Address 1776 K ST NW

City WASHINGTON	State DC	Zip Code 20006-2304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN LLP	Occupation (for Individual) PARTNER
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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
12		31		2019

**Transaction ID : SA11A.1328886**

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 37
	<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)  
**Reclaim America PAC**

**A. HUTHER, CHRISTOPHER, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K STREET NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328882**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**B. KELLY, CHRISTOPHER, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K ST NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328890**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**C. KIRBY, KATHLEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K ST NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328879**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 37
	<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)  
**Reclaim America PAC**

**A. MAYNARD, KEVIN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K ST NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328887**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**B. MCCALED, SCOTT, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K ST NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328880**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

**C. MELVIN, KIMBERLY, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 K STREET NW  
 City WASHINGTON State DC Zip Code 20006-2304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WILEY REIN LLP Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00

Date of Receipt 12 / 31 / 2019  
**Transaction ID : SA11A.1328888**  
 Amount of Each Receipt this Period 200.00  
 Memo Item CONTRIBUTION  
 WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 13 OF 37
(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)  
**Reclaim America PAC**

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

Mailing Address 1776 K ST., NW

City WASHINGTON	State DC	Zip Code 20006-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WILEY REIN	Occupation (for Individual) ATTORNEY
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : SA11A.1329618**

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

WILEY REIN PARTNER MEMO; PARTNERSHIP ATTRIBUTION

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. ABBOTT LABORATORIES EMPLOYEE PAC**

Mailing Address 100 ABBOTT PARK RD

City NORTH CHICAGO	State IL	Zip Code 60064-3502
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040279

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328871**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. AMERICAN SPORTFISHING ASSOC. PAC**

Mailing Address 1001 N. FAIRFAX ST. STE. 501

City ALEXANDRIA	State VA	Zip Code 22314-1587
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00249532

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2019

**Transaction ID : SA11C.1327903**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. BIOTECHNOLOGY INNOVATION ORGANIZATION PAC (BIO PAC)**

Mailing Address 1201 MARYLAND AVE, SW  
STE. 900

City WASHINGTON	State DC	Zip Code 20024-6129
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00355677

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	19	/	2019

**Transaction ID : SA11C.1327905**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. BLUE ORIGIN LLC PAC**

Mailing Address 21218 76TH AVENUE S.

City KENT	State WA	Zip Code 98032-2442
--------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00557793

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
12	/	17	/	2019

**Transaction ID : SA11C.1327904**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHARTER COMMUNICATIONS, INC. PAC**

Mailing Address 400 ATLANTIC STREET  
10TH FLOOR

City STAMFORD	State CT	Zip Code 06901-3512
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00426775

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328870**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CISCO SYSTEMS, INC. FEDERAL PAC/CISCO SYSTEMS E-PAC**

Mailing Address 400 CAPITOL MALL  
SUITE 1545

City SACRAMENTO	State CA	Zip Code 95814-4434
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00362707

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328872**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. FLORIDA SUGAR CANE LEAGUE PAC**

Mailing Address 1455 PENNSYLVANIA AVE NW STE 320

City WASHINGTON	State DC	Zip Code 20004-1039
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012328

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2019

**Transaction ID : SA11C.1327902**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. INT'L ASSOC OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING**

Mailing Address 1750 NEW YORK AVE. NW  
SUITE 400

City WASHINGTON	State DC	Zip Code 20006-5315
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027359

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328891**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POL ACTION**

Mailing Address 7234 PARKWAY DRIVE

City HANOVER	State MD	Zip Code 21076-1307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000885

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2019

**Transaction ID : SA11C.1327534**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. MONUMENT STRATEGIES PAC**

Mailing Address 1025 CONNECTICUT AVE NW SUITE 1000

City WASHINGTON	State DC	Zip Code 20036-5417
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00586255

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2019

**Transaction ID : SA11C.1327532**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION**

Mailing Address 1600 DUKE STREET

City ALEXANDRIA	State VA	Zip Code 22314-3466
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00126763

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	17	/	2019

**Transaction ID : SA11C.1327901**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 1775 EYE ST. NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20006-2424
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00130773

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328867**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. NATIONAL STONE, SAND &amp; GRAVEL ASSOCIATION ROCKPAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 66 CANAL CENTER PLAZA SUITE 300		<b>Transaction ID : SA11C.1328874</b>
City ALEXANDRIA	State VA	Zip Code 22314-1576
FEC ID number of contributing federal political committee. <b>C</b> C00089458		Amount of Each Receipt this Period 3500.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. NATIONAL THOROUGHbred RACING ASSOCIATION POLITICAL ACTION CO</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 401 WEST MAIN STREET SUITE 222		<b>Transaction ID : SA11C.1328866</b>
City LEXINGTON	State KY	Zip Code 40507-1630
FEC ID number of contributing federal political committee. <b>C</b> C00360008		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. NUCOR CORPORATION PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 1915 REXFORD RD		<b>Transaction ID : SA11C.1328864</b>
City CHARLOTTE	State NC	Zip Code 28211-3465
FEC ID number of contributing federal political committee. <b>C</b> C00379628		Amount of Each Receipt this Period 1500.00
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)**

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

Mailing Address 1015 15TH STREET NW  
STE. 200

City WASHINGTON State DC Zip Code 20005-2635

FEC ID number of contributing federal political committee. **C** C00323048

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
12 / 09 / 2019

**Transaction ID : SA11C.1327530**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**B. PFIZER PAC**

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

Mailing Address 235 E. 42ND ST

City NEW YORK State NY Zip Code 10017-5703

FEC ID number of contributing federal political committee. **C** C00016683

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
12 / 31 / 2019

**Transaction ID : SA11C.1328868**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

**C. REALTORS PAC- NATIONAL ASSOCIATION OF REALTORS PAC**

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

Mailing Address 430 NORTH MICHIGAN AVENUE

City CHICAGO State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2019

**Transaction ID : SA11C.1328873**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. RITE AID CORPORATION POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 30 HUNTER LANE

City CAMP HILL	State PA	Zip Code 17011-2400
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00104083

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2019

**Transaction ID : SA11C.1327531**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. TECO ENERGY INC EMPLOYEES' PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 702 N FRANKLIN ST

City TAMPA	State FL	Zip Code 33602-4429
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00161422

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	09	/	2019

**Transaction ID : SA11C.1327625**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C. TRUCKING PAC OF THE AMERICAN TRUCKING ASSOC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 430 FIRST STREET S.E.  
SUITE 100

City WASHINGTON	State DC	Zip Code 20003-1826
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00002881

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.1328869**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. U.S. TRAVEL ASSOCIATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1100 NEW YORK AVENUE NW  
SUITE 450W

City WASHINGTON State DC Zip Code 20005-3934

FEC ID number of contributing federal political committee. **C** C00457754

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2019

**Transaction ID : SA11C.1328865**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	45000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. RUBIO VICTORY COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 228 S WASHINGTON ST  
STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00494617

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 41513.69

Date of Receipt: 12 / 31 / 2019  
**Transaction ID : SA12.1329535**

Amount of Each Receipt this Period: 23000.00

Memo Item  
TRANSFER  
DISTRIBUTION OF NET JFC PROCEEDS

**B. ASHER, ROBERT, B., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1307 TOWNSHIP LINE RD  
P.O. BOX 305

City GWYNEDD VALLEY State PA Zip Code 19437-0305

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

Name of Employer (for Individual) Occupation (for Individual)  
ASHERS CHOCOLATE MANUFACTURER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 12 / 2019  
**Transaction ID : SA.1320827.1.1219**

Amount of Each Receipt this Period: 5000.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. BRION, JOSEPH, E., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 922 SCONELLTOWN RD.

City WEST CHESTER State PA Zip Code 19382-2158

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

Name of Employer (for Individual) Occupation (for Individual)  
BUCKLEY BRION ATTORNEY

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt: 11 / 21 / 2019  
**Transaction ID : SA.1326760.1.1219**

Amount of Each Receipt this Period: 1900.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	23000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. D'ISERNIA, JOSEPH, E., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 27158

City PANAMA CITY	State FL	Zip Code 32411-7158
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) EASTERN SHIPBUILDING		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>5000.00</b>

Date of Receipt  
**09 / 09 / 2019**  
**Transaction ID : SA.1321340.1.1219**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**B. DISERNIA, BRIAN, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3605 DELWOOD DRIVE

City PANAMA CITY BEACH	State FL	Zip Code 32408-7404
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) EASTERN SHIPBUILDING GROUP, INC.		Occupation (for Individual) PRESIDENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <b>4800.00</b>

Date of Receipt  
**06 / 03 / 2019**  
**Transaction ID : SA.1315762.1.1219**

Amount of Each Receipt this Period  
**4800.00**

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. GIOIA, ANTHONY, H., AMBASSADOR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 925 DELAWARE AVE.  
APARTMENT 7D

City BUFFALO	State NY	Zip Code 14209-1868
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer (for Individual) RETIRED		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <b>4800.00</b>

Date of Receipt  
**06 / 21 / 2019**  
**Transaction ID : SA.1316997.1.1219**

Amount of Each Receipt this Period  
**4800.00**

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. HILFERTY, DANIEL, J., MR.,</b>			Date of Receipt MM / DD / YYYY 08 / 12 / 2019
Mailing Address 220 CEDARBROOK ROAD			<b>Transaction ID : SA.1320826.1.1219</b>
City ARDMORE	State PA	Zip Code 19003-1702	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) KEYSTONE MERCY HEALTH		Occupation (for Individual) PRESIDENT	TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. HIPPI, VAN, D., MR., JR.</b>			Date of Receipt MM / DD / YYYY 07 / 29 / 2019
Mailing Address 809 N. QUAKER LANE			<b>Transaction ID : SA.1320376.1.1219</b>
City ALEXANDRIA	State VA	Zip Code 22302-3416	Amount of Each Receipt this Period 4800.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) AMERICAN DEFENSE INTL. INC.		Occupation (for Individual) CHAIRMAN	TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4800.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. KHAN, CODY, , MR.,</b>			Date of Receipt MM / DD / YYYY 07 / 22 / 2019
Mailing Address 243 EAGLE DRIVE			<b>Transaction ID : SA.1320374.1.1219</b>
City PANAMA CITY BEACH	State FL	Zip Code 32407-2821	Amount of Each Receipt this Period 4800.00
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item TRANSFER
Name of Employer (for Individual) HILTON INN RESORT		Occupation (for Individual) OWNER	TRANSFER FROM RUBIO VICTORY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. LEE, CYNTHIA, R., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 SUNRISE CAY DRIVE

City KEY LARGO	State FL	Zip Code 33037-5301
-------------------	-------------	------------------------

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 ▼  
4800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2019

**Transaction ID : SA.1325858.1.1219**

Amount of Each Receipt this Period  
4800.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**B. LEE, PATRICK, P., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13 SUNRISE CAY DRIVE

City KEY LARGO	State FL	Zip Code 33037-5301
-------------------	-------------	------------------------

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 ▼  
4800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	14	/	2019

**Transaction ID : SA.1325857.1.1219**

Amount of Each Receipt this Period  
4800.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

**C. WHITE, DAVID, J., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2747 SPRINGHILL RD

City CLIFTON HTS	State PA	Zip Code 19018-3411
---------------------	-------------	------------------------

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

Name of Employer (for Individual) DWD MECHANICAL CONTRACTOR, INC.	Occupation (for Individual) FULL SERVICE HVAC, PROCESS PIPI
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	05	/	2019

**Transaction ID : SA.1327543.1.1219**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM RUBIO VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 37
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
FRIENDS OF MIKE H.

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606-2647
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00492231

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

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

**Transaction ID : SA.1321344.1.1219**

Amount of Each Receipt this Period  
3000.00

Memo Item  
TRANSFER

TRANSFER FROM RUBIO VICTORY

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	23000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. HOLLER, DAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I31843

Amount of Each Disbursement this Period: 1667.00

Memo Item

**B. HOWD, CHRIS, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1024 N. RANDOLPH ST.

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement ADMINISTRATIVE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I31843

Amount of Each Disbursement this Period: 316.80

Memo Item

**C. IACOVELLA, NICK, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST.  
STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3185

Amount of Each Disbursement this Period: 407.00

Memo Item

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

2390.80

**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)  
**Reclaim America PAC**

**A. NEEDHAM, MICHAEL, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST. STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3185

Amount of Each Disbursement this Period: 2313.75

Memo Item

**B. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 84314

City BATON ROUGE State LA Zip Code 70884

Purpose of Disbursement ONLINE PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 18 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3183

Amount of Each Disbursement this Period: 40.30

Memo Item

**C. ANEDOT**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 84314

City BATON ROUGE State LA Zip Code 70884

Purpose of Disbursement ONLINE PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3184

Amount of Each Disbursement this Period: 40.30

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2394.35

**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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 12 / 23 / 2019
Mailing Address 1909 K ST., NW		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3184</b> Amount of Each Disbursement this Period [ ] 6.00
City WASHINGTON	State DC	Zip Code 20006-2720
Purpose of Disbursement MERCHANT FEES		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T FINANCIAL</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2019
Mailing Address P.O. BOX 580340		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3184</b> Amount of Each Disbursement this Period [ ] 3426.36
City CHARLOTTE	State NC	Zip Code 28258
Purpose of Disbursement SEE MEMOS		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 12 / 17 / 2019
Mailing Address 4333 AMON CARTER BOULEVARD MD 5675		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I3186</b> Amount of Each Disbursement this Period [ ] 649.90
City SAVANNAH	State TX	Zip Code 94103
Purpose of Disbursement TRAVEL		Category/ Type [ ]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 3432.36
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input 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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. DISNEY RESORT**

Mailing Address 500 S BUENA VISTA ST

City BURBANK State CA Zip Code 91521-0001

Purpose of Disbursement VENDOR CREDIT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3186!

Amount of Each Disbursement this Period: - 235.13

Memo Item

Full Name (Last, First, Middle Initial)  
**B. ENTERPRISE RENT A CAR**

Mailing Address 35 E COLONIAL DR.

City ORLANDO State FL Zip Code 32801-4572

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3186!

Amount of Each Disbursement this Period: 321.80

Memo Item

Full Name (Last, First, Middle Initial)  
**C. HILTON GARDEN INN**

Mailing Address 10 E GRAND AVE

City CHICAGO State IL Zip Code 60611

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3186!

Amount of Each Disbursement this Period: 1744.03

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. MARRIOTT INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Mailing Address 10400 FERNWOOD RD

City BETHESDA State MD Zip Code 20817-1102

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3186i

Amount of Each Disbursement this Period: 664.74

Memo Item

**B. UBER TECHNOLOGIES INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 1455 MARKET ST.

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3186i

Amount of Each Disbursement this Period: 99.41

Memo Item

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement DATA MANAGEMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3184

Amount of Each Disbursement this Period: 594.35

Memo Item

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

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

594.35

**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)  
**Reclaim America PAC**

**A. GULA GRAHAM**

Full Name (Last, First, Middle Initial)

Mailing Address 499 S. CAPITOL ST., SW STE. 420

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement CATERING/PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3184

Amount of Each Disbursement this Period: 3367.00

Memo Item

**B. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC**

Full Name (Last, First, Middle Initial)

Mailing Address 45 NORTH HILL DR., STE. 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3185C

Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. HUCKABY DAVIS LISKER INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST, STE. 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 27 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I3185

Amount of Each Disbursement this Period: 2520.80

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10887.80

**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)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial) <b>A. RED RIVER CO. LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 27 / 2019
Mailing Address C/O MSWANIGER BUSINESS SERVICES85		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3185</b> Amount of Each Disbursement this Period 37381.95
City CHESAPEAKE BEACH	State MD	Zip Code 20732
Purpose of Disbursement FUNDRAISING CONSULTING/TRAVEL/CATERING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. SOCKO STRATEGIES LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 27 / 2019
Mailing Address 4323 CATHEDRAL AVE., NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3185</b> Amount of Each Disbursement this Period 4033.00
City WASHINGTON	State DC	Zip Code 20016
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. SOCKO STRATEGIES LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 28 / 2019
Mailing Address 4323 CATHEDRAL AVE., NW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I3186</b> Amount of Each Disbursement this Period 4046.98
City WASHINGTON	State DC	Zip Code 20016
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	45461.93
<b>TOTAL</b> This Period (last page this line number only).....▶	65161.59

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)  
**A. ALASKANS FOR DAN SULLIVAN**

Mailing Address 3705 ARCTIC BLVD #447

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**SULLIVAN, DAN, , ,**

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

Date of Disbursement  
MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

**C** C00570994  
**Transaction ID : SB23.I31838**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. COLLINS FOR SENATOR**

Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**COLLINS, SUSAN, M, ,**

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

Date of Disbursement  
MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

**C** C00314575  
**Transaction ID : SB23.I31845**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. FRIENDS OF JIM INHOFE**

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**INHOFE, JAMES, M. SEN., ,**

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

Date of Disbursement  
MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

**C** C00207993  
**Transaction ID : SB23.I31847**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

**A. GEORGIANS FOR KELLY LOEFFLER**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 20036

City ATLANTA State GA Zip Code 30325

Purpose of Disbursement CONTRIBUTION

Candidate Name LOEFFLER, KELLY, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) Special General

State: GA District:

Date of Disbursement

MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

C C00729608

Transaction ID : SB23.I31848

Amount of Each Disbursement this Period

5000.00

Memo Item

**B. JIM RISCH FOR U.S. SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 407 W JEFFERSON STREET

City BOISE State ID Zip Code 83702-6049

Purpose of Disbursement CONTRIBUTION

Candidate Name RISCH, JAMES, E, ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify)

State: ID District:

Date of Disbursement

MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

C C00440362

Transaction ID : SB23.I31852

Amount of Each Disbursement this Period

5000.00

Memo Item

**C. MCCONNELL SENATE COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement CONTRIBUTION

Candidate Name MCCONNELL, MITCH, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify)

State: KY District:

Date of Disbursement

MM / DD / YYYY  
12 / 27 / 2019

FEC Identification Number

C C00193342

Transaction ID : SB23.I31853

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial)

**A. ROUNDS FOR SENATE**

Mailing Address 2418 WHISPERING SHORES

City FORT PIERR State SD Zip Code 57532

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**ROUNDS, MIKE, , ,**

Office Sought:  House  Senate  President

State: SD District:

Disbursement For: 2020  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.I31858**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. TEAM GRAHAM INC**

Mailing Address PO BOX 1801

City COLUMBIA State SC Zip Code 29202

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**GRAHAM, LINDSEY, O, ,**

Office Sought:  House  Senate  President

State: SC District:

Disbursement For: 2020  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.I31861**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. TEXANS FOR SENATOR JOHN CORNYN INC.**

Mailing Address PO BOX 13026

City AUSTIN State TX Zip Code 78711

Purpose of Disbursement CONTRIBUTION

Candidate Name  
**CORNYN, JOHN, SEN, ,**

Office Sought:  House  Senate  President

State: TX District:

Disbursement For: 2020  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB23.I31862**  
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Reclaim America PAC**

Full Name (Last, First, Middle Initial) <b>A. NRSC</b>		Date of Disbursement MM / DD / YYYY 12 / 27 / 2019
Mailing Address 425 2ND STREET NE		FEC Identification Number C C00027466 <b>Transaction ID : SB23.I31856</b>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 10000.00
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

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