

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2018"/>	<input type="text" value="4087.45"/>	<input type="text" value="4087.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="4087.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="717719.06"/>	<input type="text" value="717719.06"/>
(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="721806.51"/>	<input type="text" value="721806.51"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="612461.27"/>	<input type="text" value="612461.27"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="109345.24"/>	<input type="text" value="109345.24"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value=".00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value=".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: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20986.00	20986.00
(ii) Unitemized	696733.06	696733.06
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	717719.06	717719.06
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	717719.06	717719.06
12. Transfers From Affiliated/Other Party Committees.....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received.....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	.00	.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	.00	.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfers (add 18(a) and 18(b))..	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	717719.06	717719.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	717719.06	717719.06

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 .....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures	612461.27	612461.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	612461.27	612461.27
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	.00	.00
24. Independent Expenditures (use Schedule E) .....	.00	.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs).....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	.00	.00
29. Other Disbursements (Including Non-Federal Donations).....	.00	.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share.....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	612461.27	612461.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	612461.27	612461.27

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	717719.06	717719.06
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	717719.06	717719.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	612461.27	612461.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	612461.27	612461.27

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 130
<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

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. Arrow Manufacturing
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6577 Midland Ct

City Allenton	State WI	Zip Code 53002
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : SA11Ai-CN21

Amount of Each Receipt this Period
250.00

Memo Item

B. J J Boat Trailer Supply
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12007 Dixie Hwy

City Valley Station	State KY	Zip Code 40272
------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
301.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	21	/	2018

Transaction ID : SA11Ai-CN90

Amount of Each Receipt this Period
301.00

Memo Item

C. Bivens, Kelly, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3115 Wesley Pl

City Colorado Springs	State CO	Zip Code 80917
--------------------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	02	/	2018

Transaction ID : SA11Ai-CN16008

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	801.00
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 130
	<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. Bready, Cheryl, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 38 Congdon St

City Providence	State RI	Zip Code 2906
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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 ▼
1000.00

Date of Receipt
MM / DD / YYYY
02 / 28 / 2018

Transaction ID : SA11Ai-CN17482

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 39128 Cobrums Wharf Rd

City Avenue	State MD	Zip Code 20609
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 08 / 2018

Transaction ID : SA11Ai-CN24717

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 3602 La Costa Rd

City Missouri City	State TX	Zip Code 77459
-----------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
01 / 18 / 2018

Transaction ID : SA11Ai-CN23510

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1800.00
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 130
	<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. Candler, Selina, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 537 Diamond Rdg
 City Marshall State NC Zip Code 28753
 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 ▼ 300.00

Date of Receipt **03 / 08 / 2018**
Transaction ID : SA11Ai-CN18262
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Cashman, Jay/ Christy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 315 Dartmouth St
 City Boston State MA Zip Code 2116
 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 ▼ 250.00

Date of Receipt **01 / 29 / 2018**
Transaction ID : SA11Ai-CN24038
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Chen, Felicia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Lullaby Ln
 City North Easton State MA Zip Code 2356
 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 ▼ 350.00

Date of Receipt **03 / 15 / 2018**
Transaction ID : SA11Ai-CN21380
 Amount of Each Receipt this Period 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 130
<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. Course, Dianne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 County Road 215
 City Walnut State MS Zip Code 38683
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 16 / 2018**
Transaction ID : SA11Ai-CN18985
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Deighton, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2360 Valley Way
 City Snellville State GA Zip Code 30078
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) YOLANDA SCHL OF DRIVING Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 05 / 2018**
Transaction ID : SA11Ai-CN15858
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Dominguez, Carlos, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2637 Buffalo Hills Dr
 City Watford City State ND Zip Code 58854
 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 ▼ 500.00

Date of Receipt **03 / 05 / 2018**
Transaction ID : SA11Ai-CN15662
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1300.00
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 130
	<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. Evans, Terry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 781
 City Santa Ynez State CA Zip Code 93460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 28 / 2018
Transaction ID : SA11Ai-CN245
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Fowler, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 278 Balboa Ct
 City Frisco State TX Zip Code 75034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNAVAILABLE Occupation (for Individual) UNAVAILABLE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2018
Transaction ID : SA11Ai-CN18678
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Fox, Camille, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3500 Galt Ocean Dr Apt 210
 City Ft Lauderdale State FL Zip Code 33308
 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 ▼ 350.00

Date of Receipt 02 / 06 / 2018
Transaction ID : SA11Ai-CN24599
 Amount of Each Receipt this Period 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 130
<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. Friedman, Phyllis K Z, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 119 Reservoir Rd

City Hillsborough	State CA	Zip Code 94010
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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 ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2018

Transaction ID : SA11Ai-CN1751

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 1219 E 2nd Ave SE

City Rome	State GA	Zip Code 30161
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MECHANICAL AND CODING	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	15	/	2018

Transaction ID : SA11Ai-CN2018

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 319 W Foothills Dr

City Drums	State PA	Zip Code 18222
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UNAVAILABLE	Occupation (for Individual) DISCIPLINE OFFICER
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2018

Transaction ID : SA11Ai-CN24516

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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 130
<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. Grim, Jesse, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 109 N 6th St

City Emmaus	State PA	Zip Code 18049
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JG TOOL REPAIR	Occupation (for Individual) UNAVAILABLE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

Transaction ID : SA11Ai-CN18538

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address PO Box 1011

City Vernal	State UT	Zip Code 84078
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) JOHN HARLAN CONSTRUCTION	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2018

Transaction ID : SA11Ai-CN18010

Amount of Each Receipt this Period
300.00

Memo Item

C. Huggins, David L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2720 Landers Ave

City Nashville	State TN	Zip Code 37211
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DERMATECH INC	Occupation (for Individual) OWNER
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2018

Transaction ID : SA11Ai-CN647

Amount of Each Receipt this Period
150.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 13 OF 130
	<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. Jackson, Doug, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3088 Lenox Rd NE Apt 323
 City Atlanta State GA Zip Code 30324
 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
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2018
Transaction ID : SA11Ai-CN14772
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Kaufman, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 620 N Milwaukee St
 City Plymouth State WI Zip Code 53073
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 08 / 2018
Transaction ID : SA11Ai-CN20535
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Klepfer, Robin A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11405 E 63rd St
 City Indianapolis State IN Zip Code 46236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DISABILITY Occupation (for Individual) DISABLE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2018
Transaction ID : SA11Ai-CN24848
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 14 OF 130
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Emergency Responders and Firefighters

A. Kos, Sarah, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16486 County Road 18

City Fort Lupton	State CO	Zip Code 80621
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Colorado Motor Carrier Association	Occupation (for Individual) Project Manager
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2018

Transaction ID : SA11Ai-CN7567

Amount of Each Receipt this Period
300.00

Memo Item

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

Mailing Address 331 Maine St

City Brunswick	State ME	Zip Code 4011
-------------------	-------------	------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2018

Transaction ID : SA11Ai-CN8413

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 2501 Museum Way Apt 806

City Fort Worth	State TX	Zip Code 76107
--------------------	-------------	-------------------

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 ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		17		2018

Transaction ID : SA11Ai-CN23394

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 15 OF 130
	<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. Lee, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14414 Blanco Rd Ste 300
 City San Antonio State TX Zip Code 78216
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2018
Transaction ID : SA11Ai-CN14917
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Liao, Yvonne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 634 W Naomi Ave Unit 5
 City Arcadia State CA Zip Code 91007
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 02 / 2018
Transaction ID : SA11Ai-CN7155
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Lira, Isabel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2212 Colony Plz
 City Jacksonville State NC Zip Code 28546
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2018
Transaction ID : SA11Ai-CN22376
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 16 OF 130
	<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. McDonald, Frances T, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 Locust Rd
 City Windham State NH Zip Code 3087
 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 ▼ 260.00

Date of Receipt **02 / 08 / 2018**
Transaction ID : SA11Ai-CN20441
 Amount of Each Receipt this Period 260.00
 Memo Item

B. Merkel, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10014 Arrowgrass Dr
 City Houston State TX Zip Code 77064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Natural Gas Company Financial Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **03 / 02 / 2018**
Transaction ID : SA11Ai-CN16433
 Amount of Each Receipt this Period 225.00
 Memo Item

C. Montanbo, Sergio, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1330 Fyffe Unitca
 City Denver State CO Zip Code 80219
 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 ▼ 205.00

Date of Receipt **03 / 12 / 2018**
Transaction ID : SA11Ai-CN19657
 Amount of Each Receipt this Period 205.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	690.00
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 17 OF 130
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Association for Emergency Responders and Firefighters

A. Moore, Barbara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1532 Michigan Ave
 City La Porte State IN Zip Code 46350
 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
 M M M / D D D / Y Y Y Y Y Y
 01 / 17 / 2018
Transaction ID : SA11Ai-CN23407
 Amount of Each Receipt this Period
 300.00
 Memo Item

B. Ochoa, Kevin, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5108 Bakerloo Ln
 City Pasco State WA Zip Code 99301
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2018
Transaction ID : SA11Ai-CN18189
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Palma, Bryan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 Briarwood Rd
 City Mullica Hill State NJ Zip Code 8062
 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 01 / 2018
Transaction ID : SA11Ai-CN16770
 Amount of Each Receipt this Period
 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 18 OF 130
	<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. Papin, Donna, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3640 Eden Dr
 City Dallas State TX Zip Code 75287
 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 ▼ 225.00

Date of Receipt 03 / 16 / 2018
Transaction ID : SA11Ai-CN21666
 Amount of Each Receipt this Period 225.00
 Memo Item

B. Parvin, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55201 Burel Road
 City Raleigh State NC Zip Code 27606
 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 ▼ 500.00

Date of Receipt 02 / 12 / 2018
Transaction ID : SA11Ai-CN19825
 Amount of Each Receipt this Period 500.00
 Memo Item

C. Pratt, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3647 Robinson Rd
 City Missouri City State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) market and research company Occupation (for Individual) owner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 12 / 2018
Transaction ID : SA11Ai-CN19646
 Amount of Each Receipt this Period 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1125.00
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 19 OF 130
	<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. Rechter, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2936 Bellflower Ln
 City Naples State FL Zip Code 34105
 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 ▼ 365.00

Date of Receipt **01 / 19 / 2018**
Transaction ID : SA11Ai-CN23574
 Amount of Each Receipt this Period 365.00
 Memo Item

B. Reid, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 433 Drayer Dr
 City Hummelstown State PA Zip Code 17036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 REFUSED REFUSED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt **03 / 05 / 2018**
Transaction ID : SA11Ai-CN15575
 Amount of Each Receipt this Period 240.00
 Memo Item

C. Richards, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1398 W Nimisila Rd
 City Clinton State OH Zip Code 44216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 KLR CONSTRUCTION RETIRED CONSTRUCTION WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **01 / 17 / 2018**
Transaction ID : SA11Ai-CN23383
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1105.00
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 130
	<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. Rodgers, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10625 Pond Meadow Dr
 City Oklahoma City State OK Zip Code 73151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 15 / 2018
Transaction ID : SA11Ai-CN26050
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Rosing, Wayne E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3463 State St Apt 255
 City Santa Barbara State CA Zip Code 93105
 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 ▼ 1000.00

Date of Receipt 03 / 16 / 2018
Transaction ID : SA11Ai-CN21997
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Ruppert, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2735 E Sand Rd
 City Port Clinton State OH Zip Code 43452
 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 ▼ 350.00

Date of Receipt 01 / 18 / 2018
Transaction ID : SA11Ai-CN23507
 Amount of Each Receipt this Period 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1650.00
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 21 OF 130
	<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. Santamaria, Ileana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5611 Silverthorn Glen Dr
 City Spring State TX Zip Code 77379
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 23 / 2018**
Transaction ID : SA11Ai-CN22431
 Amount of Each Receipt this Period **500.00**
 Memo Item

B. Saraceni, Tom, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10504 Meakin Dr
 City Raleigh State NC Zip Code 27614
 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 ▼ **260.00**

Date of Receipt **03 / 13 / 2018**
Transaction ID : SA11Ai-CN20858
 Amount of Each Receipt this Period **260.00**
 Memo Item

C. Schultz, Ofelia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9730 Heritage Farm
 City San Antonio State TX Zip Code 78245
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **HOMEMAKER** Occupation (for Individual) **HOMEMAKER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **03 / 28 / 2018**
Transaction ID : SA11Ai-CN407
 Amount of Each Receipt this Period **120.00**
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	880.00
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 22 OF 130
	<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. Sleming, Maudi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 26689
 City Fort Worth State TX Zip Code 76126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cattle Ranch Occupation (for Individual) Self Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 22 / 2018
Transaction ID : SA11Ai-CN22272
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Slooman, Brenda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 W Ruby HI
 City Pleasanton State CA Zip Code 94566
 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 03 / 12 / 2018
Transaction ID : SA11Ai-CN12864
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Smith, Jody, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2301 Mustang Dr Ste 100
 City Grapevine State TX Zip Code 76051
 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 ▼ 1000.00

Date of Receipt 02 / 01 / 2018
Transaction ID : SA11Ai-CN21689
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2300.00
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 23 OF 130
	<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. Sterk, Jason, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4101 N 4th Ave
 City Sioux Falls State SD Zip Code 57104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMPONENT MFG Occupation (for Individual) VICE PRES
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2018
Transaction ID : SA11Ai-CN22406
 Amount of Each Receipt this Period 300.00
 Memo Item

B. Taron, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 Sequoyah Blvd
 City Shawnee State OK Zip Code 74801
 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 ▼ 300.00

Date of Receipt 03 / 02 / 2018
Transaction ID : SA11Ai-CN15961
 Amount of Each Receipt this Period 300.00
 Memo Item

C. Tobin, Toni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 756 Lisboa Ct
 City Walnut Creek State CA Zip Code 94598
 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 ▼ 500.00

Date of Receipt 03 / 26 / 2018
Transaction ID : SA11Ai-CN9423
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 24 OF 130
	<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. Virant, Daniel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 105 E 58th St
 City Savannah State GA Zip Code 31405
 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 ▼ 220.00

Date of Receipt **02 / 09 / 2018**
Transaction ID : SA11Ai-CN20032
 Amount of Each Receipt this Period 220.00
 Memo Item

B. Walls, Christy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9330 Fairway Trl
 City Grand Blanc State MI Zip Code 48439
 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 ▼ 515.00

Date of Receipt **03 / 14 / 2018**
Transaction ID : SA11Ai-CN21039
 Amount of Each Receipt this Period 515.00
 Memo Item

C. Ward, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20568 Chestnut Cir
 City Livonia State MI Zip Code 48152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UNAVAILABLE Occupation (for Individual) UNAVAILABLE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 26 / 2018**
Transaction ID : SA11Ai-CN7347
 Amount of Each Receipt this Period 300.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1035.00
TOTAL This Period (last page this line number only).....▶	20986.00

**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)

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

Purpose of Disbursement Authnet Gateway

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX1
Amount of Each Disbursement this Period
271.54

Memo Item Authnet Gateway

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX2
Amount of Each Disbursement this Period
219.59

Memo Item Bankcard Fees

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Authnet Gateway

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX3
Amount of Each Disbursement this Period
38.27

Memo Item Authnet Gateway

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

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

529.40

[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

Purpose of Disbursement
Merchant fee

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-EX4
Amount of Each Disbursement this Period

Memo Item
Merchant fee

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Chargeback

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-EX9
Amount of Each Disbursement this Period

Memo Item
Chargeback

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
North American

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-EX13
Amount of Each Disbursement this Period

Memo Item
North American

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

Purpose of Disbursement
Ret Dep item

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	1		1	1		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX21

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

20.00

Ret Dep item

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Credit Card Payment

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	1		1	1		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX22

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

40.00

Credit Card Payment

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
North American

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	1		1	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX24

Amount of Each Disbursement this Period

5	5	0	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

55.00

North American

Memo Item

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

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

1	1	5	0	0	0	0	0	0	0
0	0	0	0	0	0	0	0	0	0

115.00

**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)
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

Purpose of Disbursement
Ret Dep item

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-EX29
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

Purpose of Disbursement
North American

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-EX33
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

Purpose of Disbursement
Chargeback

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-EX37
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

Purpose of Disbursement
Ret Dep item

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-EX40
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

Purpose of Disbursement
Wisconsin SCTF

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-EX42
Amount of Each Disbursement this Period

Wisconsin SCTF

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

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-EX47
Amount of Each Disbursement this Period

Credit Card Payment

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

Purpose of Disbursement Chargeback

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
01 / 30 / 2018

FEC Identification Number

Transaction ID : SB21b-EX49
Amount of Each Disbursement this Period

Chargeback

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Ret Dep item

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
01 / 30 / 2018

FEC Identification Number

Transaction ID : SB21b-EX50
Amount of Each Disbursement this Period

Ret Dep item

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Ret Dep item

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
01 / 30 / 2018

FEC Identification Number

Transaction ID : SB21b-EX51
Amount of Each Disbursement this Period

Ret Dep item

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

Purpose of Disbursement
EWH Small Business Accounting S.C.

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

Transaction ID : SB21b-EX54
Amount of Each Disbursement this Period

Memo Item EWH Small Business Accounting S.C.

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Ret Deposit Item

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

Transaction ID : SB21b-EX57
Amount of Each Disbursement this Period

Ret Deposit Item

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Ret Deposit Item

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

Transaction ID : SB21b-EX58
Amount of Each Disbursement this Period

Ret Deposit Item

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

Purpose of Disbursement North American

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX62
Amount of Each Disbursement this Period
364.49
North American

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Merch Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX63
Amount of Each Disbursement this Period
94.16
Merch Service

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement Authnet Gateway

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX64
Amount of Each Disbursement this Period
28.18
Authnet Gateway

Memo Item

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

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

486.83

**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

Purpose of Disbursement
Authnet Gateway

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			0	2			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX65

Amount of Each Disbursement this Period

[REDACTED] 2.25

Authnet Gateway

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Merch Service

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			0	7			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX77

Amount of Each Disbursement this Period

[REDACTED] 30.00

Merch Service

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Merch Service

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			0	7			2	0	1	8		

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX78

Amount of Each Disbursement this Period

[REDACTED] 20.00

Merch Service

Memo Item

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

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

[REDACTED] 52.25

[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

Purpose of Disbursement
Wisconsin SCTF

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
02	/	09	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX83

Amount of Each Disbursement this Period

20.00

Wisconsin SCTF

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Merch Service

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
02	/	12	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX88

Amount of Each Disbursement this Period

15.00

Merch Service

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City
Pittsburgh

State
PA

Zip Code
15230

Purpose of Disbursement
Clearent LLC

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
02	/	14	/	2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX92

Amount of Each Disbursement this Period

25.00

Clearent LLC

Memo Item

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

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

60.00

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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

Purpose of Disbursement
Ret Deposit Item

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-EX93
Amount of Each Disbursement this Period

Ret Deposit Item

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Ret Deposit Item

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-EX94
Amount of Each Disbursement this Period

Ret Deposit Item

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Ret Deposit Item

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-EX95
Amount of Each Disbursement this Period

Ret Deposit Item

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

Purpose of Disbursement
Wisconsin SCTF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21b-EX98

Amount of Each Disbursement this Period

Memo Item
Wisconsin SCTF

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21b-EX103

Amount of Each Disbursement this Period

Memo Item
Merch Service

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21b-EX11:

Amount of Each Disbursement this Period

Memo Item
Merch Service

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

Purpose of Disbursement
Ret Deposit Item

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-EX114
Amount of Each Disbursement this Period

Ret Deposit Item
 Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Ret Deposit Item

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-EX118
Amount of Each Disbursement this Period

Ret Deposit Item
 Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Service 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-EX111
Amount of Each Disbursement this Period

Service Charge
 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

Purpose of Disbursement
Wisconsin SCTF

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-EX12
 Amount of Each Disbursement this Period

 Wisconsin SCTF

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
North American

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-EX13
 Amount of Each Disbursement this Period

 North American

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

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-EX12
 Amount of Each Disbursement this Period

 Merch Service

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

Purpose of Disbursement
Authnet Gateway

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-EX12!
Amount of Each Disbursement this Period

Memo Item
Authnet Gateway

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

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-EX134
Amount of Each Disbursement this Period

Memo Item
Merch Service

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

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-EX14!
Amount of Each Disbursement this Period

Memo Item
Merch Service

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

Purpose of Disbursement
Return Deposit Item

001
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-EX15
Amount of Each Disbursement this Period

Return Deposit Item
 Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Clearent LLC

001
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-EX16
Amount of Each Disbursement this Period

Clearent LLC
 Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Return Deposit Item

001
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-EX16
Amount of Each Disbursement this Period

Return Deposit Item
 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

Purpose of Disbursement
Merch Service

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 26 / 2018

FEC Identification Number

Transaction ID : SB21b-EX173
Amount of Each Disbursement this Period

Merch Service

Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Credit Card Payment

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 26 / 2018

FEC Identification Number

Transaction ID : SB21b-EX174
Amount of Each Disbursement this Period

Credit Card Payment

Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Merch Service

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 27 / 2018

FEC Identification Number

Transaction ID : SB21b-EX171
Amount of Each Disbursement this Period

Merch Service

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

Purpose of Disbursement
Clearent LLC

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-EX177
Amount of Each Disbursement this Period

Memo Item
Clearent LLC

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Return Deposit Item

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-EX178
Amount of Each Disbursement this Period

Memo Item
Return Deposit Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
Return Deposit Item

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-EX18
Amount of Each Disbursement this Period

Memo Item
Return Deposit 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

Purpose of Disbursement
Return Deposit Item

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-EX18z
Amount of Each Disbursement this Period

Return Deposit Item
 Memo Item

Full Name (Last, First, Middle Initial)

B. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

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-EX183
Amount of Each Disbursement this Period

Credit Card Payment
 Memo Item

Full Name (Last, First, Middle Initial)

C. Pnc Bank

Mailing Address PO Box 609

City Pittsburgh State PA Zip Code 15230

Purpose of Disbursement
North American

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-EX18'
Amount of Each Disbursement this Period

North American
 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. Authnet Gateway

Mailing Address PO Box 899

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Merchant Discount

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-EX5
Amount of Each Disbursement this Period

Memo Item
Merchant Discount

Full Name (Last, First, Middle Initial)

B. Authnet Gateway

Mailing Address PO Box 899

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
merchant Interchange

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-EX6
Amount of Each Disbursement this Period

merchant Interchange

Memo Item

Full Name (Last, First, Middle Initial)

C. Authnet Gateway

Mailing Address PO Box 899

City San Francisco State CA Zip Code 94128

Purpose of Disbursement
Merchant Interchange

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-EX69
Amount of Each Disbursement this Period

Merchant Interchange

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. Authnet Gateway		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address PO Box 899		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX70 Amount of Each Disbursement this Period [REDACTED] 101.40 Internal Revenue Service <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Internal Revenue Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Authnet Gateway		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address PO Box 899		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX129 Amount of Each Disbursement this Period [REDACTED] 174.00 Return Deposit Item <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Return Deposit Item	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Authnet Gateway		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address PO Box 899		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX131 Amount of Each Disbursement this Period [REDACTED] 95.80 Internal Revenue Service <input type="checkbox"/> Memo Item
City San Francisco	State CA	
Zip Code 94128	Purpose of Disbursement Internal Revenue Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 371.20
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. TPF Inc.

Mailing Address 1835 E Charleston
Ste 4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Donor Relations

001
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 03 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX7
Amount of Each Disbursement this Period
32638.71
Donor Relations

Memo Item

Full Name (Last, First, Middle Initial)

B. TPF Inc.

Mailing Address 1835 E Charleston
Ste 4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Donor Relations

001
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 10 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX18
Amount of Each Disbursement this Period
34147.88
Donor Relations

Memo Item

Full Name (Last, First, Middle Initial)

C. TPF Inc.

Mailing Address 1835 E Charleston
Ste 4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Donor Relations

001
Category/
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 17 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX30
Amount of Each Disbursement this Period
40000.00
Donor Relations

Memo Item

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

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

106786.59

**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 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. TPF Inc.

Mailing Address 1835 E Charleston
Ste 4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Donor Relations

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2018

FEC Identification Number

C
Transaction ID : **SB21b-EX38**
Amount of Each Disbursement this Period
23043.00
Donor Relations

Memo Item

Full Name (Last, First, Middle Initial)

B. TPF Inc.

Mailing Address 1835 E Charleston
Ste 4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Donor Relations

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2018

FEC Identification Number

C
Transaction ID : **SB21b-EX56**
Amount of Each Disbursement this Period
30135.00
Donor Relations

Memo Item

Full Name (Last, First, Middle Initial)

C. EWH Small Business Accounting S.C.

Mailing Address 20670 Watertown Rd
Ste 1040

City Waukesha State WI Zip Code 53186

Purpose of Disbursement
Wisconsin SCTF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C
Transaction ID : **SB21b-EX10**
Amount of Each Disbursement this Period
579.50
Wisconsin SCTF

Memo Item

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

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

53757.50

**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. EWH Small Business Accounting S.C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		10		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

001

Category/
Type

Candidate Name

FEC Identification Number

C

Transaction ID : SB21b-EX19

Amount of Each Disbursement this Period

134.71

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item EWH Small Business Accounting S.C.

Full Name (Last, First, Middle Initial)

B. EWH Small Business Accounting S.C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		17		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

001

Category/
Type

Candidate Name

FEC Identification Number

C

Transaction ID : SB21b-EX31

Amount of Each Disbursement this Period

132.95

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item EWH Small Business Accounting S.C.

Full Name (Last, First, Middle Initial)

C. EWH Small Business Accounting S.C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		24		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

001

Category/
Type

Candidate Name

FEC Identification Number

C

Transaction ID : SB21b-EX39

Amount of Each Disbursement this Period

133.96

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item EWH Small Business Accounting S.C.

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

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

401.62

**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. EWH Small Business Accounting S.C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		31		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City Waukesha State WI Zip Code 53186

Purpose of Disbursement
Department of Workforce Development

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21b-EX52
Amount of Each Disbursement this Period
129.83

Candidate Name

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

Memo Item Department of Workforce Development

Full Name (Last, First, Middle Initial)

B. EWH Small Business Accounting S.C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		05		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City Waukesha State WI Zip Code 53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21b-EX72
Amount of Each Disbursement this Period
559.85
EWH Small Business Accounting S.C.
<input type="checkbox"/> Memo Item

Candidate Name

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

Full Name (Last, First, Middle Initial)

C. EWH Small Business Accounting S.C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		07		2018

Mailing Address 20670 Watertown Rd
Ste 1040

City Waukesha State WI Zip Code 53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

001
Category/ Type

FEC Identification Number

C
Transaction ID : SB21b-EX76
Amount of Each Disbursement this Period
136.80
EWH Small Business Accounting S.C.
<input type="checkbox"/> Memo Item

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)..... ▶

826.48

**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. EWH Small Business Accounting S.C.		Date of Disbursement MM / DD / YYYY 02 / 14 / 2018
Mailing Address 20670 Watertown Rd Ste 1040		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX90
City Waukesha	State WI	Zip Code 53186
Purpose of Disbursement EWH Small Business Accounting S.C.		Amount of Each Disbursement this Period [REDACTED] 132.30
Candidate Name		Memo Item <input type="checkbox"/> EWH Small Business Accounting S.C.
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. EWH Small Business Accounting S.C.		Date of Disbursement MM / DD / YYYY 02 / 21 / 2018
Mailing Address 20670 Watertown Rd Ste 1040		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX105
City Waukesha	State WI	Zip Code 53186
Purpose of Disbursement EWH Small Business Accounting S.C.		Amount of Each Disbursement this Period [REDACTED] 133.05
Candidate Name		Memo Item <input type="checkbox"/> EWH Small Business Accounting S.C.
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. EWH Small Business Accounting S.C.		Date of Disbursement MM / DD / YYYY 02 / 28 / 2018
Mailing Address 20670 Watertown Rd Ste 1040		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX111
City Waukesha	State WI	Zip Code 53186
Purpose of Disbursement EWH Small Business Accounting S.C.		Amount of Each Disbursement this Period [REDACTED] 133.05
Candidate Name		Memo Item <input type="checkbox"/> EWH Small Business Accounting S.C.
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:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 398.40
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. EWH Small Business Accounting S.C.

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

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	5		2	0	1	8

FEC Identification Number

C []
Transaction ID : SB21b-EX13z
Amount of Each Disbursement this Period
[] 470.00
[] Memo Item EWH Small Business Accounting S.C.

Full Name (Last, First, Middle Initial)

B. EWH Small Business Accounting S.C.

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

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	7		2	0	1	8

FEC Identification Number

C []
Transaction ID : SB21b-EX138
Amount of Each Disbursement this Period
[] 129.08
[] Memo Item EWH Small Business Accounting S.C.

Full Name (Last, First, Middle Initial)

C. EWH Small Business Accounting S.C.

Mailing Address 20670 Watertown Rd
Ste 1040

City
Waukesha

State
WI

Zip Code
53186

Purpose of Disbursement
EWH Small Business Accounting S.C.

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	1		2	0	1	8

FEC Identification Number

C []
Transaction ID : SB21b-EX15i
Amount of Each Disbursement this Period
[] 139.00
[] Memo Item EWH Small Business Accounting S.C.

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

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

7	3	8	.	0	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. EWH Small Business Accounting S.C.		Date of Disbursement MM / DD / YYYY 03 / 21 / 2018
Mailing Address 20670 Watertown Rd Ste 1040		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX164
City Waukesha	State WI	Zip Code 53186
Purpose of Disbursement EWH Small Business Accounting S.C.		Amount of Each Disbursement this Period [REDACTED] 132.30
Candidate Name		Memo Item <input type="checkbox"/> EWH Small Business Accounting S.C.
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) B. EWH Small Business Accounting S.C.		Date of Disbursement MM / DD / YYYY 03 / 28 / 2018
Mailing Address 20670 Watertown Rd Ste 1040		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX180
City Waukesha	State WI	Zip Code 53186
Purpose of Disbursement EWH Small Business Accounting S.C.		Amount of Each Disbursement this Period [REDACTED] 133.05
Candidate Name		Memo Item <input type="checkbox"/> EWH Small Business Accounting S.C.
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Clearent LLC		Date of Disbursement MM / DD / YYYY 01 / 05 / 2018
Mailing Address 222 South Central Suite 700 Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX11
City Clayton	State MO	Zip Code 63105
Purpose of Disbursement Clearent LLC		Amount of Each Disbursement this Period [REDACTED] 2383.34
Candidate Name		Memo Item <input type="checkbox"/> Clearent LLC
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:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 2648.69
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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX17
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX20
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX28
Amount of Each Disbursement this Period

Clearent LLC

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX48
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Oregon Department of Justice

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-EX59
Amount of Each Disbursement this Period

Oregon Department of Justice

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX73
Amount of Each Disbursement this Period

Clearent LLC

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Nielsen Merksamer

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-EX79
Amount of Each Disbursement this Period

Nielsen Merksamer

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Merch Service

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-EX91
Amount of Each Disbursement this Period

Merch Service

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX11;
Amount of Each Disbursement this Period

Clearent LLC

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX117
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX133
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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-EX13:
Amount of Each Disbursement this Period

Clearent LLC

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

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 / 2018

FEC Identification Number

Transaction ID : SB21b-EX13f
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 12 / 2018

FEC Identification Number

Transaction ID : SB21b-EX145
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2018

FEC Identification Number

Transaction ID : SB21b-EX14i
Amount of Each Disbursement this Period

Clearent LLC

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 13 / 2018

FEC Identification Number

Transaction ID : SB21b-EX147
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 14 / 2018

FEC Identification Number

Transaction ID : SB21b-EX151
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Merch Service

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

Transaction ID : SB21b-EX161
Amount of Each Disbursement this Period

Merch Service

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Clearent LLC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 20 / 2018

FEC Identification Number

Transaction ID : SB21b-EX161
Amount of Each Disbursement this Period

Clearent LLC

Memo Item

Full Name (Last, First, Middle Initial)

B. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
North American

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 22 / 2018

FEC Identification Number

Transaction ID : SB21b-EX165
Amount of Each Disbursement this Period

North American

Memo Item

Full Name (Last, First, Middle Initial)

C. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement
Merch Service

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 27 / 2018

FEC Identification Number

Transaction ID : SB21b-EX171
Amount of Each Disbursement this Period

Merch Service

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. Clearent LLC

Mailing Address 222 South Central Suite 700
Suite 700

City Clayton State MO Zip Code 63105

Purpose of Disbursement Oregon Department of Justice

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

C [Redacted]

Transaction ID : SB21b-EX184
Amount of Each Disbursement this Period

15.00

Oregon Department of Justice
 Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Wisconsin SCTF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2018

FEC Identification Number

C [Redacted]

Transaction ID : SB21b-EX23
Amount of Each Disbursement this Period

141.69

Wisconsin SCTF
 Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Wisconsin SCTF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 19 / 2018

FEC Identification Number

C [Redacted]

Transaction ID : SB21b-EX32
Amount of Each Disbursement this Period

653.99

Wisconsin SCTF
 Memo Item

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

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

810.68

[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. North American Marketing Inc.

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Wisconsin Department of Revenue

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	1		2	6		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX41

Amount of Each Disbursement this Period

[REDACTED] 934.33

Wisconsin Department of Revenue

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Inc.

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Wisconsin Department of Revenue

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		0	2		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX60

Amount of Each Disbursement this Period

[REDACTED] 561.38

Wisconsin Department of Revenue

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Inc.

Mailing Address 3245 N 126th St

City
Brookfield

State
WI

Zip Code
53005

Purpose of Disbursement
Oregon Department of Justice

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		0	9		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX81

Amount of Each Disbursement this Period

[REDACTED] 853.87

Oregon Department of Justice

Memo Item

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

[REDACTED] 2349.58

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. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Oregon Department of Justice

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 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX96
 Amount of Each Disbursement this Period
 795.28
 Oregon Department of Justice

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Oregon Department of Justice

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 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX106
 Amount of Each Disbursement this Period
 754.91
 Oregon Department of Justice

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Oregon Department of Justice

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 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX121
 Amount of Each Disbursement this Period
 809.45
 Oregon Department of Justice

Memo Item

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

2359.64

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 Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Oregon Department of Justice

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 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX13
 Amount of Each Disbursement this Period
 556.41
 Oregon Department of Justice

Memo Item

Full Name (Last, First, Middle Initial)

B. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Oregon Department of Justice

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 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX13
 Amount of Each Disbursement this Period
 538.93
 Oregon Department of Justice

Memo Item

Full Name (Last, First, Middle Initial)

C. North American Marketing Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Clearent LLC

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 / 22 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX16
 Amount of Each Disbursement this Period
 681.26
 Clearent LLC

Memo Item

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

1776.60

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 Inc.

Mailing Address 3245 N 126th St

City Brookfield State WI Zip Code 53005

Purpose of Disbursement Wisconsin Department of Revenue

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

Transaction ID : SB21b-EX18
Amount of Each Disbursement this Period

Wisconsin Department of Revenue
 Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement North American

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
01 / 26 / 2018

FEC Identification Number

Transaction ID : SB21b-EX43
Amount of Each Disbursement this Period

North American
 Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Clearent LLC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
02 / 02 / 2018

FEC Identification Number

Transaction ID : SB21b-EX66
Amount of Each Disbursement this Period

Clearent LLC
 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. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement
North American

001
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
02		09		2018

FEC Identification Number

C
Transaction ID : SB21b-EX84
Amount of Each Disbursement this Period
55.38
North American

Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement
North American

001
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
02		16		2018

FEC Identification Number

C
Transaction ID : SB21b-EX99
Amount of Each Disbursement this Period
55.38
North American

Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement
Wisconsin SCTF

001
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
02		23		2018

FEC Identification Number

C
Transaction ID : SB21b-EX10i
Amount of Each Disbursement this Period
55.38
Wisconsin SCTF

Memo Item

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

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

166.14

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. Wisconsin Sctf

Mailing Address PO Box 74400

City
Milwaukee

State
WI

Zip Code
53274

Purpose of Disbursement
Authnet Gateway

001
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		02		2018

FEC Identification Number

C
Transaction ID : SB21b-EX12f
Amount of Each Disbursement this Period
55.38
Authnet Gateway

Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Sctf

Mailing Address PO Box 74400

City
Milwaukee

State
WI

Zip Code
53274

Purpose of Disbursement
Wisconsin SCTF

001
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		09		2018

FEC Identification Number

C
Transaction ID : SB21b-EX141
Amount of Each Disbursement this Period
105.00
Wisconsin SCTF

Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Sctf

Mailing Address PO Box 74400

City
Milwaukee

State
WI

Zip Code
53274

Purpose of Disbursement
Wisconsin SCTF

001
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		16		2018

FEC Identification Number

C
Transaction ID : SB21b-EX15:
Amount of Each Disbursement this Period
105.00
Wisconsin SCTF

Memo Item

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

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

265.38

**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. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Wisconsin Department of Revenue

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX16
Amount of Each Disbursement this Period
105.00
Wisconsin Department of Revenue
 Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Sctf

Mailing Address PO Box 74400

City Milwaukee State WI Zip Code 53274

Purpose of Disbursement Clearent LLC

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement
MM / DD / YYYY
03 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX188
Amount of Each Disbursement this Period
105.00
Clearent LLC
 Memo Item

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address PO Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Internal Revenue Service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement
MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX15
Amount of Each Disbursement this Period
1583.10
Internal Revenue Service
 Memo Item

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

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

1793.10

**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. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 01 / 12 / 2018	
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]	
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB21b-EX26
Purpose of Disbursement Internal Revenue Service		Category/Type 001	Amount of Each Disbursement this Period 1801.05
Candidate Name		Internal Revenue Service	
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. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 01 / 19 / 2018	
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]	
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB21b-EX35
Purpose of Disbursement Internal Revenue Service		Category/Type 001	Amount of Each Disbursement this Period 2146.60
Candidate Name		Internal Revenue Service	
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. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018	
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]	
City Cincinnati	State OH	Zip Code 45280	Transaction ID : SB21b-EX44
Purpose of Disbursement Ret Dep item		Category/Type 001	Amount of Each Disbursement this Period 2032.42
Candidate Name		Ret Dep item	
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).....▶	5980.07
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. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 01 / 31 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Internal Revenue Service	Category/Type 001	Transaction ID : SB21b-EX55
Candidate Name		Amount of Each Disbursement this Period 438.70
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:		Internal Revenue Service

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Merchant Fee	Category/Type 001	Transaction ID : SB21b-EX67
Candidate Name		Amount of Each Disbursement this Period 1663.38
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:		Merchant Fee

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Ret Deposit Item	Category/Type 001	Transaction ID : SB21b-EX85
Candidate Name		Amount of Each Disbursement this Period 2359.07
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:		Ret Deposit Item

SUBTOTAL of Disbursements This Page (optional).....▶	4461.15
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. Internal Revenue Service

Mailing Address PO Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Chargeback

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-EX10c
 Amount of Each Disbursement this Period

 Chargeback

Memo Item

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address PO Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement North American

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-EX109
 Amount of Each Disbursement this Period

 North American

Memo Item

Full Name (Last, First, Middle Initial)

C. Internal Revenue Service

Mailing Address PO Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Merchant Fee

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-EX12
 Amount of Each Disbursement this Period

 Merchant Fee

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. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement North American	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2105.73	
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:	North American	

Full Name (Last, First, Middle Initial) B. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement North American	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2464.96	
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:	North American	

Full Name (Last, First, Middle Initial) C. Internal Revenue Service		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address PO Box 804522		FEC Identification Number C [REDACTED]
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Wisconsin SCTF	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 2277.39	
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:	Wisconsin SCTF	

SUBTOTAL of Disbursements This Page (optional).....▶	6848.08
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. Internal Revenue Service

Mailing Address PO Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Service Charge

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 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX18c
 Amount of Each Disbursement this Period
 2282.21
 Service Charge

Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 05 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX16
 Amount of Each Disbursement this Period
 204.90
 Wisconsin Department of Revenue

Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX27
 Amount of Each Disbursement this Period
 239.76
 Wisconsin Department of Revenue

Memo Item

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

2726.87

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. Wisconsin Department of Revenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	9		2	0	1	8

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX36
Amount of Each Disbursement this Period

[REDACTED] 310.62

Wisconsin Department of Revenue

Memo Item

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	8

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX45
Amount of Each Disbursement this Period

[REDACTED] 147.50

Internal Revenue Service

Memo Item

Purpose of Disbursement Internal Revenue Service

001
Category/
Type

Candidate Name

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

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	6		2	0	1	8

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX46
Amount of Each Disbursement this Period

[REDACTED] 338.96

Wisconsin Department of Revenue

Memo Item

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/
Type

Candidate Name

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

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

[REDACTED] 797.08

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. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement Merchant Discount

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 Y
 02 / 02 / 2018

FEC Identification Number

Transaction ID : SB21b-EX68
 Amount of Each Disbursement this Period

 Merchant Discount

Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

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 Y
 02 / 02 / 2018

FEC Identification Number

Transaction ID : SB21b-EX71
 Amount of Each Disbursement this Period

 Wisconsin Department of Revenue

Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement Internal Revenue Service

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 Y
 02 / 09 / 2018

FEC Identification Number

Transaction ID : SB21b-EX86
 Amount of Each Disbursement this Period

 Internal Revenue Service

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. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		09		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX87

Amount of Each Disbursement this Period

[REDACTED] 382.55

Wisconsin Department of Revenue

Memo Item

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX101

Amount of Each Disbursement this Period

[REDACTED] 107.84

Internal Revenue Service

Memo Item

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Internal Revenue Service

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		16		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX10;

Amount of Each Disbursement this Period

[REDACTED] 336.83

Wisconsin Department of Revenue

Memo Item

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

001
Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

[REDACTED] 827.22

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. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX11c
Amount of Each Disbursement this Period

[REDACTED] 171.00

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Internal Revenue Service

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Internal Revenue Service
 Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX11c
Amount of Each Disbursement this Period

[REDACTED] 350.44

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Wisconsin Department of Revenue

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Wisconsin Department of Revenue
 Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2018

Mailing Address PO Box 930208

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX12i
Amount of Each Disbursement this Period

[REDACTED] 61.17

City Milwaukee State WI Zip Code 53293

Purpose of Disbursement
Merchant Discount

001
Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Merchant Discount
 Memo Item

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

[REDACTED] 582.61

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. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

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 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX13
Amount of Each Disbursement this Period
328.00

Wisconsin Department of Revenue
 Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Internal Revenue Service

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 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX143
Amount of Each Disbursement this Period
121.50
Internal Revenue Service

Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

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 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX14
Amount of Each Disbursement this Period
317.00

Wisconsin Department of Revenue
 Memo Item

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

766.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Association for Emergency Responders and Firefighters

Full Name (Last, First, Middle Initial) A. Wisconsin Department of Revenue		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address PO Box 930208		FEC Identification Number C [REDACTED]
City Milwaukee	State WI	Zip Code 53293
Purpose of Disbursement Internal Revenue Service	Candidate Name	001 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) ▼	Transaction ID : SB21b-EX157 Amount of Each Disbursement this Period 146.91 Internal Revenue Service
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Wisconsin Department of Revenue		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address PO Box 930208		FEC Identification Number C [REDACTED]
City Milwaukee	State WI	Zip Code 53293
Purpose of Disbursement Wisconsin Department of Revenue	Candidate Name	001 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) ▼	Transaction ID : SB21b-EX158 Amount of Each Disbursement this Period 375.85 Wisconsin Department of Revenue
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Wisconsin Department of Revenue		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address PO Box 930208		FEC Identification Number C [REDACTED]
City Milwaukee	State WI	Zip Code 53293
Purpose of Disbursement Internal Revenue Service	Candidate Name	001 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) ▼	Transaction ID : SB21b-EX17 Amount of Each Disbursement this Period 105.25 Internal Revenue Service
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	628.01
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. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

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 / 23 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX17
Amount of Each Disbursement this Period

[REDACTED] 340.29

Wisconsin Department of Revenue
 Memo Item

Full Name (Last, First, Middle Initial)

B. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Internal Revenue Service

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 / 30 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX19
Amount of Each Disbursement this Period

[REDACTED] 140.60

Internal Revenue Service
 Memo Item

Full Name (Last, First, Middle Initial)

C. Wisconsin Department of Revenue

Mailing Address PO Box 930208

City Milwaukee

State WI

Zip Code 53293

Purpose of Disbursement Wisconsin Department of Revenue

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 / 30 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX19
Amount of Each Disbursement this Period

[REDACTED] 364.92

Wisconsin Department of Revenue
 Memo Item

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

[REDACTED] 845.81

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. Department of Workforce Development

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2018

Mailing Address 6083 N Teutonia Ave
PO Box 09999

City Milwaukee State WI Zip Code 53209

Purpose of Disbursement Service Charge
Candidate Name
Category/Type 001

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

FEC Identification Number

C [REDACTED]
Transaction ID : SB21b-EX53
Amount of Each Disbursement this Period
[REDACTED] 2835.45
Service Charge

Memo Item

Full Name (Last, First, Middle Initial)

B. Oregon Department of Justice

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	09	/	2018

Mailing Address PO Box 14506 Salem

City Salem State OR Zip Code 97309

Purpose of Disbursement Wisconsin Department of Revenue
Candidate Name
Category/Type 001

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

FEC Identification Number

C [REDACTED]
Transaction ID : SB21b-EX140
Amount of Each Disbursement this Period
[REDACTED] 34.38
Wisconsin Department of Revenue

Memo Item

Full Name (Last, First, Middle Initial)

C. Oregon Department of Justice

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2018

Mailing Address PO Box 14506 Salem

City Salem State OR Zip Code 97309

Purpose of Disbursement Wisconsin Department of Revenue
Candidate Name
Category/Type 001

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

FEC Identification Number

C [REDACTED]
Transaction ID : SB21b-EX15
Amount of Each Disbursement this Period
[REDACTED] 34.38
Wisconsin Department of Revenue

Memo Item

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

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

[REDACTED]	2904.21
[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. Oregon Department of Justice

Mailing Address PO Box 14506 Salem

City Salem State OR Zip Code 97309

Purpose of Disbursement Oregon Department of Justice

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	3		2	0	1	8

FEC Identification Number

Transaction ID : SB21b-EX166
 Amount of Each Disbursement this Period

 Oregon Department of Justice
 Memo Item

Full Name (Last, First, Middle Initial)

B. Oregon Department of Justice

Mailing Address PO Box 14506 Salem

City Salem State OR Zip Code 97309

Purpose of Disbursement Wisconsin SCTF

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		3	0		2	0	1	8

FEC Identification Number

Transaction ID : SB21b-EX186
 Amount of Each Disbursement this Period

 Wisconsin SCTF
 Memo Item

Full Name (Last, First, Middle Initial)

C. Nielsen Merksamer

Mailing Address 2350 Kerner Boulevard Suite 250

City San Rafael State CA Zip Code 94901

Purpose of Disbursement Clearent LLC

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		0	8		2	0	1	8

FEC Identification Number

Transaction ID : SB21b-EX80
 Amount of Each Disbursement this Period

 Clearent LLC
 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. Nielsen Merksamer

Mailing Address 2350 Kerner Boulevard
Suite 250

City San Rafael State CA Zip Code 94901

Purpose of Disbursement
Nielsen Merksamer

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 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX15c
Amount of Each Disbursement this Period
 833.34
Nielsen Merksamer

Memo Item

Full Name (Last, First, Middle Initial)

B. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee State WI Zip Code 53206

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
01 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX193
Amount of Each Disbursement this Period
 168.87
Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee State WI Zip Code 53206

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
01 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX19c
Amount of Each Disbursement this Period
 331.31
Payroll

Memo Item

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

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

1333.52

**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. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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
01 / 26 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX195

Amount of Each Disbursement this Period

218.19

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX196

Amount of Each Disbursement this Period

196.64

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX197

Amount of Each Disbursement this Period

207.81

Payroll

Memo Item

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

622.64

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. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX19f
Amount of Each Disbursement this Period

[REDACTED] 219.56

Memo Item

Full Name (Last, First, Middle Initial)

B. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX199
Amount of Each Disbursement this Period

[REDACTED] 306.21

Memo Item

Full Name (Last, First, Middle Initial)

C. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX20i
Amount of Each Disbursement this Period

[REDACTED] 256.66

Memo Item

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

[REDACTED] 782.43

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. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX201

Amount of Each Disbursement this Period

251.40

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX202

Amount of Each Disbursement this Period

277.78

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 23 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX20:

Amount of Each Disbursement this Period

250.34

Payroll

Memo Item

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

779.52

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. Bent, Thomas B, , ,

Mailing Address 2875 N 25th Street

City Milwaukee

State WI

Zip Code 53206

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 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX204
Amount of Each Disbursement this Period
205.46
Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Blair Daniel T

Mailing Address 6914 W Lincoln Ave #11

City West Allis

State WI

Zip Code 53219

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
01 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX207
Amount of Each Disbursement this Period
77.57
Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Blair Daniel T

Mailing Address 6914 W Lincoln Ave #11

City West Allis

State WI

Zip Code 53219

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 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX201
Amount of Each Disbursement this Period
77.58
Payroll

Memo Item

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

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

360.61

**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. Blair Daniel T		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address 6914 W Lincoln Ave #11		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX20
City West Allis	State WI	Zip Code 53219
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 128.41
Candidate Name		Category/Type 001
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. Blair Daniel T		Date of Disbursement MM / DD / YYYY 02 / 16 / 2018
Mailing Address 6914 W Lincoln Ave #11		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX210
City West Allis	State WI	Zip Code 53219
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 122.22
Candidate Name		Category/Type 001
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. Blair Daniel T		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 6914 W Lincoln Ave #11		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX21
City West Allis	State WI	Zip Code 53219
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 77.57
Candidate Name		Category/Type 001
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)..... ▶

328.20

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. Blair Daniel T

Mailing Address 6914 W Lincoln Ave
#11

City West Allis State WI Zip Code 53219

Purpose of Disbursement Payroll 001
Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 02 / 2018

FEC Identification Number
C
Transaction ID : SB21b-EX212
Amount of Each Disbursement this Period
122.24

Memo Item

Full Name (Last, First, Middle Initial)

B. Blair Daniel T

Mailing Address 6914 W Lincoln Ave
#11

City West Allis State WI Zip Code 53219

Purpose of Disbursement Payroll 001
Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2018

FEC Identification Number
C
Transaction ID : SB21b-EX213
Amount of Each Disbursement this Period
128.41

Memo Item

Full Name (Last, First, Middle Initial)

C. Blair Daniel T

Mailing Address 6914 W Lincoln Ave
#11

City West Allis State WI Zip Code 53219

Purpose of Disbursement Payroll 001
Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 16 / 2018

FEC Identification Number
C
Transaction ID : SB21b-EX214
Amount of Each Disbursement this Period
77.57

Memo Item

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

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

328.22

**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. Blair Daniel T

Mailing Address 6914 W Lincoln Ave
#11

City West Allis State WI Zip Code 53219

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-EX215
Amount of Each Disbursement this Period

Memo Item Payroll

Full Name (Last, First, Middle Initial)

B. Blair Daniel T

Mailing Address 6914 W Lincoln Ave
#11

City West Allis State WI Zip Code 53219

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-EX216
Amount of Each Disbursement this Period

Memo Item Payroll

Full Name (Last, First, Middle Initial)

C. Cannestra Larry

Mailing Address 1800 West Becker Street
Apt 2011

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-EX211
Amount of Each Disbursement this Period

Memo Item Payroll

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. Cannestra Larry

Mailing Address 1800 West Becker Street
Apt 2011

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-EX22t
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Cannestra Larry

Mailing Address 1800 West Becker Street
Apt 2011

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-EX22t
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Cannestra Larry

Mailing Address 1800 West Becker Street
Apt 2011

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-EX22t
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. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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

/ /

FEC Identification Number

C
Transaction ID : SB21b-EX224
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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

/ /

FEC Identification Number

C
Transaction ID : SB21b-EX225
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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

/ /

FEC Identification Number

C
Transaction ID : SB21b-EX221
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. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX227
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX228
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX22:
 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. Dolister Brian		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 3751 E Plankington Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX23c Amount of Each Disbursement this Period 130.61 Payroll <input type="checkbox"/> Memo Item
City Cudahay	State WI	Zip Code 53115
Purpose of Disbursement Payroll		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:		

Full Name (Last, First, Middle Initial) B. Dolister Brian		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address 3751 E Plankington Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX231 Amount of Each Disbursement this Period 70.19 Payroll <input type="checkbox"/> Memo Item
City Cudahay	State WI	Zip Code 53115
Purpose of Disbursement Payroll		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:		

Full Name (Last, First, Middle Initial) C. Dolister Brian		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 3751 E Plankington Avenue		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX23; Amount of Each Disbursement this Period 137.03 Payroll <input type="checkbox"/> Memo Item
City Cudahay	State WI	Zip Code 53115
Purpose of Disbursement Payroll		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:		

SUBTOTAL of Disbursements This Page (optional).....▶	337.83
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. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX23:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX23:
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Dolister Brian

Mailing Address 3751 E Plankington Avenue

City Cudahay State WI Zip Code 53115

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-EX23:
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. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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
01 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX237
Amount of Each Disbursement this Period
343.54

Memo Item

Full Name (Last, First, Middle Initial)

B. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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
01 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX238
Amount of Each Disbursement this Period
428.74

Memo Item

Full Name (Last, First, Middle Initial)

C. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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
01 / 26 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX23!
Amount of Each Disbursement this Period
277.05

Memo Item

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

1049.33

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. Gosia Dean L		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018	
Mailing Address 4132 N 61		FEC Identification Number C [REDACTED]	
City Milwaukee	State WI	Zip Code 53216	Transaction ID : SB21b-EX24c
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 389.85
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. Gosia Dean L		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018	
Mailing Address 4132 N 61		FEC Identification Number C [REDACTED]	
City Milwaukee	State WI	Zip Code 53216	Transaction ID : SB21b-EX241
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 415.99
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. Gosia Dean L		Date of Disbursement MM / DD / YYYY 02 / 16 / 2018	
Mailing Address 4132 N 61		FEC Identification Number C [REDACTED]	
City Milwaukee	State WI	Zip Code 53216	Transaction ID : SB21b-EX24;
Purpose of Disbursement Payroll		Category/ Type 001	Amount of Each Disbursement this Period 597.64
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).....▶	1403.48
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. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX24:
Amount of Each Disbursement this Period
286.54

Memo Item

Full Name (Last, First, Middle Initial)

B. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX24:
Amount of Each Disbursement this Period
493.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Gosia Dean L

Mailing Address 4132 N 61

City Milwaukee

State WI

Zip Code 53216

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 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX24:
Amount of Each Disbursement this Period
433.72

Memo Item

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

1214.01

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. Gosia Dean L			Date of Disbursement MM / DD / YYYY 03 / 16 / 2018	
Mailing Address 4132 N 61				
City Milwaukee	State WI	Zip Code 53216	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21b-EX24f	
Candidate Name			Amount of Each Disbursement this Period 533.57	
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) ▼		Payroll	
State: District:			<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Gosia Dean L			Date of Disbursement MM / DD / YYYY 03 / 23 / 2018	
Mailing Address 4132 N 61				
City Milwaukee	State WI	Zip Code 53216	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21b-EX247	
Candidate Name			Amount of Each Disbursement this Period 402.91	
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) ▼		Payroll	
State: District:			<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Gosia Dean L			Date of Disbursement MM / DD / YYYY 03 / 30 / 2018	
Mailing Address 4132 N 61				
City Milwaukee	State WI	Zip Code 53216	FEC Identification Number C	
Purpose of Disbursement Payroll			Transaction ID : SB21b-EX24i	
Candidate Name			Amount of Each Disbursement this Period 383.73	
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) ▼		Payroll	
State: District:			<input type="checkbox"/> Memo Item	

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

1320.21

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. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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	1		1	9		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX25c

Amount of Each Disbursement this Period

3	5	2	7	3
---	---	---	---	---

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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	1		2	6		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX251

Amount of Each Disbursement this Period

3	6	0	7	9
---	---	---	---	---

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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		0	2		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX25;

Amount of Each Disbursement this Period

1	2	7	5	2
---	---	---	---	---

Payroll

Memo Item

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

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

8	4	1	0	4
---	---	---	---	---

--	--	--	--	--

**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. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 09 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX25:

Amount of Each Disbursement this Period

[REDACTED] 337.26

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX254

Amount of Each Disbursement this Period

[REDACTED] 264.75

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2018

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX25:

Amount of Each Disbursement this Period

[REDACTED] 417.49

Payroll

Memo Item

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

[REDACTED] 1019.50

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. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX25f

Amount of Each Disbursement this Period

149.49

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX257

Amount of Each Disbursement this Period

297.96

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Harris Thomas O

Mailing Address 828a W Galena St
#11

City Milwaukee

State WI

Zip Code 53205

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 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX25i

Amount of Each Disbursement this Period

359.34

Payroll

Memo Item

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

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

806.79

**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. Harris Thomas O		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address 828a W Galena St #11		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX25
City Milwaukee	State WI	Zip Code 53205
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 258.44
Candidate Name		Payroll
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. Harris Thomas O		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address 828a W Galena St #11		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX26
City Milwaukee	State WI	Zip Code 53205
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 344.12
Candidate Name		Payroll
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) C. Huffman Royce E		Date of Disbursement MM / DD / YYYY 01 / 05 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX26
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 289.78
Candidate Name		Payroll
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	892.34
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. Huffman Royce E		Date of Disbursement MM / DD / YYYY 01 / 12 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX262
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 310.64
Candidate Name		Payroll
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. Huffman Royce E		Date of Disbursement MM / DD / YYYY 01 / 19 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX263
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 380.66
Candidate Name		Payroll
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) C. Huffman Royce E		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX26
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 390.69
Candidate Name		Payroll
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	1081.99
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. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

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-EX265
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

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-EX266
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

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-EX267
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. Huffman Royce E		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX266
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 379.62
Candidate Name		Payroll
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. Huffman Royce E		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX269
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 375.57
Candidate Name		Payroll
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) C. Huffman Royce E		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 1653 S 22nd Street #1r		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX271
City Milwaukee	State WI	Zip Code 53204
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 379.62
Candidate Name		Payroll
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	1134.81
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. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

Purpose of Disbursement Payroll

001
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 Y
03 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX271
Amount of Each Disbursement this Period
 379.62

Memo Item Payroll

Full Name (Last, First, Middle Initial)

B. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

Purpose of Disbursement Payroll

001
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 Y
03 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX272
Amount of Each Disbursement this Period
 359.30

Memo Item Payroll

Full Name (Last, First, Middle Initial)

C. Huffman Royce E

Mailing Address 1653 S 22nd Street
#1r

City Milwaukee State WI Zip Code 53204

Purpose of Disbursement Payroll

001
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 Y
03 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX27:
Amount of Each Disbursement this Period
 375.57

Memo Item Payroll

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

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

1114.49

**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. Kexel James L

Full Name (Last, First, Middle Initial)

Mailing Address 2302 12th Avenue #18

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 01 / 05 / 2018

FEC Identification Number C

Transaction ID : SB21b-EX274

Amount of Each Disbursement this Period 206.15

Payroll Memo Item

B. Kexel James L

Full Name (Last, First, Middle Initial)

Mailing Address 2302 12th Avenue #18

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 01 / 12 / 2018

FEC Identification Number C

Transaction ID : SB21b-EX275

Amount of Each Disbursement this Period 307.73

Payroll Memo Item

C. Kexel James L

Full Name (Last, First, Middle Initial)

Mailing Address 2302 12th Avenue #18

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 01 / 19 / 2018

FEC Identification Number C

Transaction ID : SB21b-EX271

Amount of Each Disbursement this Period 356.60

Payroll Memo Item

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

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

870.48

**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. Kexel James L		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX277
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 387.45	
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. Kexel James L		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX278
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 48.49	
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. Kexel James L		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX279
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 380.55	
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).....▶	816.49
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. Kexel James L

Mailing Address 2302 12th Avenue
#18

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 M	/	D D D	/	Y Y Y Y Y
02	/	16	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX28c

Amount of Each Disbursement this Period

237.71

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

B. Kexel James L

Mailing Address 2302 12th Avenue
#18

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 M	/	D D D	/	Y Y Y Y Y
02	/	23	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX281

Amount of Each Disbursement this Period

329.44

Payroll

Memo Item

Full Name (Last, First, Middle Initial)

C. Kexel James L

Mailing Address 2302 12th Avenue
#18

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 M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2018

FEC Identification Number

C

Transaction ID : SB21b-EX28;

Amount of Each Disbursement this Period

352.89

Payroll

Memo Item

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

920.04

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. Kexel James L		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX28: Amount of Each Disbursement this Period 248.88
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll		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. Kexel James L		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX284 Amount of Each Disbursement this Period 259.04
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll		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. Kexel James L		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX28: Amount of Each Disbursement this Period 271.27
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll		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).....▶	779.19
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. Kexel James L		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address 2302 12th Avenue #18		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX28f Amount of Each Disbursement this Period 277.05
City South Milwaukee	State WI	Zip Code 53172
Purpose of Disbursement Payroll		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. Martin Kevin L		Date of Disbursement MM / DD / YYYY 01 / 12 / 2018
Mailing Address 1820 W Wells Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX288 Amount of Each Disbursement this Period 186.82
City Milwaukee	State WI	Zip Code 53233
Purpose of Disbursement Payroll		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. Martin Kevin L		Date of Disbursement MM / DD / YYYY 01 / 19 / 2018
Mailing Address 1820 W Wells Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX28i Amount of Each Disbursement this Period 294.11
City Milwaukee	State WI	Zip Code 53233
Purpose of Disbursement Payroll		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)..... ▶

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

757.98
[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. Martin Kevin L		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018	
Mailing Address 1820 W Wells Street			
City Milwaukee	State WI	Zip Code 53233	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX29c Amount of Each Disbursement this Period <input type="text" value="147.94"/> Payroll	
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. Martin Kevin L		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018	
Mailing Address 1820 W Wells Street			
City Milwaukee	State WI	Zip Code 53233	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX291 Amount of Each Disbursement this Period <input type="text" value="220.10"/> Payroll	
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. Martin Kevin L		Date of Disbursement MM / DD / YYYY 02 / 16 / 2018	
Mailing Address 1820 W Wells Street			
City Milwaukee	State WI	Zip Code 53233	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX29; Amount of Each Disbursement this Period <input type="text" value="330.35"/> Payroll	
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).....▶	<input type="text" value="698.39"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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. Martin Kevin L

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		23		2018

Mailing Address 1820 W Wells Street

City Milwaukee State WI Zip Code 53233

FEC Identification Number

C [REDACTED]

Purpose of Disbursement Payroll

001
Category/Type

Transaction ID : SB21b-EX29:
Amount of Each Disbursement this Period

[REDACTED] 239.96

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. Martin Kevin L

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		02		2018

Mailing Address 1820 W Wells Street

City Milwaukee State WI Zip Code 53233

FEC Identification Number

C [REDACTED]

Purpose of Disbursement Payroll

001
Category/Type

Transaction ID : SB21b-EX29:
Amount of Each Disbursement this Period

[REDACTED] 256.28

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. Martin Kevin L

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2018

Mailing Address 1820 W Wells Street

City Milwaukee State WI Zip Code 53233

FEC Identification Number

C [REDACTED]

Purpose of Disbursement Payroll

001
Category/Type

Transaction ID : SB21b-EX29:
Amount of Each Disbursement this Period

[REDACTED] 263.57

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)..... ▶

[REDACTED] 759.81

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. Martin Kevin L

Mailing Address 1820 W Wells Street

City Milwaukee

State WI

Zip Code 53233

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 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX29f
Amount of Each Disbursement this Period
258.96

Memo Item

Full Name (Last, First, Middle Initial)

B. Martin Kevin L

Mailing Address 1820 W Wells Street

City Milwaukee

State WI

Zip Code 53233

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 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX297
Amount of Each Disbursement this Period
142.75

Memo Item

Full Name (Last, First, Middle Initial)

C. Martin Kevin L

Mailing Address 1820 W Wells Street

City Milwaukee

State WI

Zip Code 53233

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 / 30 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX29i
Amount of Each Disbursement this Period
70.72

Memo Item

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

472.43

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		Date of Disbursement MM / DD / YYYY 01 / 19 / 2018	
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX301 Amount of Each Disbursement this Period 166.15 Payroll <input type="checkbox"/> Memo Item	
City Milwaukee	State WI	Zip Code 53215	Category/Type 001
Purpose of Disbursement Payroll			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Nowak Justin		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018	
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX302 Amount of Each Disbursement this Period 251.66 Payroll <input type="checkbox"/> Memo Item	
City Milwaukee	State WI	Zip Code 53215	Category/Type 001
Purpose of Disbursement Payroll			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Nowak Justin		Date of Disbursement MM / DD / YYYY 02 / 02 / 2018	
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX30: Amount of Each Disbursement this Period 225.35 Payroll <input type="checkbox"/> Memo Item	
City Milwaukee	State WI	Zip Code 53215	Category/Type 001
Purpose of Disbursement Payroll			
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	643.16
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		Date of Disbursement MM / DD / YYYY 02 / 09 / 2018
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX304
City Milwaukee	State WI	Zip Code 53215
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 244.62
Candidate Name		Category/Type 001
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. Nowak Justin		Date of Disbursement MM / DD / YYYY 02 / 16 / 2018
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX305
City Milwaukee	State WI	Zip Code 53215
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 49.43
Candidate Name		Category/Type 001
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. Nowak Justin		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 2038 S 30th Street		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX301
City Milwaukee	State WI	Zip Code 53215
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 76.43
Candidate Name		Category/Type 001
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).....▶	370.48
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
03 / 02 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX307

Amount of Each Disbursement this Period

102.75

Payroll

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 / 09 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX308

Amount of Each Disbursement this Period

58.66

Payroll

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 / 16 / 2018

FEC Identification Number

C

Transaction ID : SB21b-EX309

Amount of Each Disbursement this Period

312.90

Payroll

Memo Item

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

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

474.31

**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 03 / 23 / 2018	
Mailing Address 2038 S 30th Street			
City Milwaukee	State WI	Zip Code 53215	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX31c Amount of Each Disbursement this Period <input type="text" value="183.71"/> Payroll	
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. Nowak Justin		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018	
Mailing Address 2038 S 30th Street			
City Milwaukee	State WI	Zip Code 53215	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX311 Amount of Each Disbursement this Period <input type="text" value="260.61"/> Payroll	
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. Olson Alan		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018	
Mailing Address 8531 W Cascade Drive			
City Franklin	State WI	Zip Code 53132	
Purpose of Disbursement Payroll		<input type="text" value="001"/> Category/Type	
Candidate Name		FEC Identification Number <input type="text" value="C"/> Transaction ID : SB21b-EX31: Amount of Each Disbursement this Period <input type="text" value="228.57"/> Payroll	
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).....▶	<input type="text" value="672.89"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 01 / 12 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX315
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 144.45
Candidate Name		Category/Type 001
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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 01 / 19 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX316
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 281.54
Candidate Name		Category/Type 001
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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 01 / 26 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX317
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 0.50
Candidate Name		Category/Type 001
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).....▶	426.49
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. Ostoich Michael J

Mailing Address 6547 Greenway #1

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

MM / DD / YYYY
02 / 02 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX31f
Amount of Each Disbursement this Period
91.43

Memo Item

Full Name (Last, First, Middle Initial)

B. Ostoich Michael J

Mailing Address 6547 Greenway #1

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

MM / DD / YYYY
02 / 09 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX319
Amount of Each Disbursement this Period
344.57

Memo Item

Full Name (Last, First, Middle Initial)

C. Ostoich Michael J

Mailing Address 6547 Greenway #1

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

MM / DD / YYYY
02 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX32i
Amount of Each Disbursement this Period
217.25

Memo Item

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

653.25

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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX321 Amount of Each Disbursement this Period 53.34 Payroll
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		001 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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 03 / 02 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX322 Amount of Each Disbursement this Period 327.23 Payroll
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		001 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) C. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 03 / 09 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX323 Amount of Each Disbursement this Period 338.67 Payroll
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		001 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	

SUBTOTAL of Disbursements This Page (optional).....▶	719.24
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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 03 / 16 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX324
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 328.16
Candidate Name		Category/Type 001
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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 03 / 23 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX325
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 348.63
Candidate Name		Category/Type 001
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. Ostoich Michael J		Date of Disbursement MM / DD / YYYY 03 / 30 / 2018
Mailing Address 6547 Greenway #1		FEC Identification Number C [REDACTED] Transaction ID : SB21b-EX321
City Greendale	State WI	Zip Code 53129
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 360.06
Candidate Name		Category/Type 001
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)..... ▶

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

1036.85
[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. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement

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		0	7		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX327

Amount of Each Disbursement this Period

[REDACTED] 9691.95

Memo Item Administrative/Salary/Overhead Expenses

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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		1	4		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX330

Amount of Each Disbursement this Period

[REDACTED] 12265.22

Memo Item processing of credit cards and verifications

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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	1		2	0	1	8

FEC Identification Number

C [REDACTED]

Transaction ID : SB21b-EX34!

Amount of Each Disbursement this Period

[REDACTED] 9702.85

Memo Item processing of credit cards and verifications

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

[REDACTED] 31660.02

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. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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
02		28		2018

FEC Identification Number

C

Transaction ID : SB21b-EX34f

Amount of Each Disbursement this Period

4804.75

Memo Item processing of credit cards and verifications

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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		07		2018

FEC Identification Number

C

Transaction ID : SB21b-EX347

Amount of Each Disbursement this Period

29099.23

Memo Item processing of credit cards and verifications

Full Name (Last, First, Middle Initial)

C. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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		14		2018

FEC Identification Number

C

Transaction ID : SB21b-EX34i

Amount of Each Disbursement this Period

36469.31

Memo Item processing of credit cards and verifications

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

70373.29

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. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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	1		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX34

Amount of Each Disbursement this Period

35930.85

Memo Item processing of credit cards and verifications

Full Name (Last, First, Middle Initial)

B. Compliance Consultants LLC

Mailing Address 1835 E. Charleston Blvd. #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement
processing of credit cards and verifications

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	8		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX35

Amount of Each Disbursement this Period

36703.45

Memo Item processing of credit cards and verifications

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City
Las Vegas

State
NV

Zip Code
89104

Purpose of Disbursement

003

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		0	7		2	0	1	8

FEC Identification Number

C

Transaction ID : SB21b-EX32

Amount of Each Disbursement this Period

6828.32

Memo Item Solicitation and Fundraising Expenses

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

79462.62

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. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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-EX33f
 Amount of Each Disbursement this Period

 software licensing

Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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-EX339
 Amount of Each Disbursement this Period

 software licensing

Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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-EX34i
 Amount of Each Disbursement this Period

 software licensing

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. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX341
 Amount of Each Disbursement this Period
 20501.76
 software licensing

Memo Item

Full Name (Last, First, Middle Initial)

B. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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 / 14 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX342
 Amount of Each Disbursement this Period
 25694.24
 software licensing

Memo Item

Full Name (Last, First, Middle Initial)

C. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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 / 21 / 2018

FEC Identification Number

C
Transaction ID : SB21b-EX34:
 Amount of Each Disbursement this Period
 25314.88
 software licensing

Memo Item

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

71510.88

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. American Technology Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement software licensing

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-EX344
 Amount of Each Disbursement this Period

 software licensing

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement

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-EX329
 Amount of Each Disbursement this Period

 Solicitation and Fundraising Expenses

Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement mailers databasing and caging

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-EX33
 Amount of Each Disbursement this Period

 mailers databasing and caging

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. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX33z
Amount of Each Disbursement this Period

mailers databasing and caging

Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX33z
Amount of Each Disbursement this Period

mailers databasing and caging

Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX33z
Amount of Each Disbursement this Period

mailers databasing and caging

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. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX335
Amount of Each Disbursement this Period

mailers databasing and caging
 Memo Item

Full Name (Last, First, Middle Initial)

B. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX336
Amount of Each Disbursement this Period

mailers databasing and caging
 Memo Item

Full Name (Last, First, Middle Initial)

C. Unified Data Services LLC

Mailing Address 1835 E Charleston Blvd #4

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
mailers databasing and caging

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-EX337
Amount of Each Disbursement this Period

mailers databasing and caging
 Memo Item

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

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