

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**OORAH! POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **PO BOX 3743**  
 Check if different than previously reported. (ACC) **CARMEL IN 46082**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00551853** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2022 through  /  /  2022

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

Signature of Treasurer WUSLICH, JEFF, , , [Electronically Filed] Date  /  /  2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

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="2022"/>		268285.84
(b) Cash on Hand at Beginning of Reporting Period.....	149282.46	
(c) Total Receipts (from Line 19) .....	43067.41	91960.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	192349.87	360246.79
7. Total Disbursements (from Line 31).....	57738.86	225635.78
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	134611.01	134611.01
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**OORAH! POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: M M / D D / Y Y Y Y Y 05 / 01 / 2022 To: M M / D D / Y Y Y Y Y 05 / 31 / 2022

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	4000.00
(ii) Unitemized .....	27.00	620.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27.00	4620.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	9500.00	45000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	9527.00	49620.00
12. Transfers From Affiliated/Other Party Committees.....	33540.41	42340.95
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	43067.41	91960.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	43067.41	91960.95

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	32713.86	137140.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	32713.86	137140.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	37500.00
24. Independent Expenditures (use Schedule E) .....	0.00	12470.29
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	25.00	25.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	25.00	25.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	38500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	57738.86	225635.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	57738.86	225635.78

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9527.00	49620.00
34. Total Contribution Refunds (from Line 28(d)) .....	25.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9502.00	49595.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	32713.86	137140.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	32713.86	137140.49

**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 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111-0001
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FEC ID number of contributing federal political committee. **C** C00118943

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2022

**Transaction ID : SA11C.136885**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. TARGET CORPORATION CITIZENS POLITICAL FORUM (TARGETCITIZENS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1000 NICOLLET MALL  
TPN-8370

City MINNEAPOLIS	State MN	Zip Code 55403-2542
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FEC ID number of contributing federal political committee. **C** C00098061

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2022

**Transaction ID : SA11C.136887**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. TOYOTA MOTOR NORTH AMERICA INC PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 325 7TH STREET, NW, SUITE 1000

City WASHINGTON	State DC	Zip Code 20004-2801
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FEC ID number of contributing federal political committee. **C** C00542365

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2022

**Transaction ID : SA11C.136886**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9500.00
<b>TOTAL</b> This Period (last page this line number only).....	9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. YOUNG VICTORY COMMITTEE II**

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

Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082-3743
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FEC ID number of contributing federal political committee. **C** C00696484

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
42340.95

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2022

**Transaction ID : SA12.137360**

Amount of Each Receipt this Period  
33540.41

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. CORNELIUS, JAMES, M., MR.,**

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

Mailing Address 7012 HUNT CLUB DRIVE

City ZIONSVILLE	State IN	Zip Code 46077-9300
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2022

**Transaction ID : SA.136888.15.2202**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG VICTORY COMMITTEE 2

**C. CORNELIUS, KATHLEEN, M., MRS.,**

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

Mailing Address 7012 HUNT CLUB DRIVE

City ZIONSVILLE	State IN	Zip Code 46077-9300
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
SELF EMPLOYED ARTIST

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	12	/	2022

**Transaction ID : SA.136889.15.2202**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER

TRANSFER FROM YOUNG VICTORY COMMITTEE 2

<b>SUBTOTAL</b> of Receipts This Page (optional).....	33540.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. FERGUSON, STEPHEN, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1608

City BLOOMINGTON	State IN	Zip Code 47402-1608
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COOK GROUP	Occupation (for Individual) EXECUTIVE
-------------------------------------------------	------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2022

**Transaction ID : SA.132411.15.2202**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

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

Mailing Address 4603 BROOKRIDGE DRIVE

City PITTSBORO	State IN	Zip Code 46167-9702
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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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2022

**Transaction ID : SA.132813.15.2202**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

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

Mailing Address PO BOX 606

City AUBURN	State IN	Zip Code 46706-0606
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CHAIRMAN	Occupation (for Individual) METAL TECHNOLOGIES, INC.
-----------------------------------------------	---------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2022

**Transaction ID : SA.134797.15.2202**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM YOUNG VICTORY COMMITTEE 2

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. MCCORKLE, SCOTT, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address **GEIST COVE WAY**

City <b>FISHERS</b>	State <b>IN</b>	Zip Code <b>46055-</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>METACX, INC.</b>	Occupation (for Individual) <b>CEO COMPUTER SOFTWARE</b>
----------------------------------------------------------	-------------------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4200.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	28	/	2022

**Transaction ID : SA.131704.15.2202**

Amount of Each Receipt this Period  

4200.00
---------

Memo Item  
**TRANSFER**  
**TRANSFER FROM YOUNG VICTORY COMMITTEE 2**

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

Mailing Address **90 W. MORGAN STREET**

City <b>AUSTIN</b>	State <b>IN</b>	Zip Code <b>47102-1741</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>MORGAN FOODS, INC.</b>	Occupation (for Individual) <b>OWNER</b>
----------------------------------------------------------------	---------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4900.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	18	/	2022

**Transaction ID : SA.136770.15.2202**

Amount of Each Receipt this Period  

4900.00
---------

Memo Item  
**TRANSFER**  
**TRANSFER FROM YOUNG VICTORY COMMITTEE 2**

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

Mailing Address **11732 SEA STAR DRIVE**

City <b>INDIANAPOLIS</b>	State <b>IN</b>	Zip Code <b>46256-9689</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) <b>RQAW</b>	Occupation (for Individual) <b>PRESIDENT/CEO</b>
--------------------------------------------------	-----------------------------------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼ **2900.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	23	/	2022

**Transaction ID : SA.137018.15.2202**

Amount of Each Receipt this Period  

2900.00
---------

Memo Item  
**TRANSFER**  
**TRANSFER FROM YOUNG VICTORY COMMITTEE 2**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 17
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**OLD NATIONAL BANK PAC**

Mailing Address **1 MAIN STREET**

City <b>EVANSVILLE</b>	State <b>IN</b>	Zip Code <b>47708-1464</b>
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FEC ID number of contributing federal political committee. **C** **C00165282**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	13	/	2022

**Transaction ID : SA.134756.15.2202**

Amount of Each Receipt this Period  

5000.00
---------

Memo Item  
**TRANSFER**

**TRANSFER FROM YOUNG VICTORY COMMITTEE 2**

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

Mailing Address \_\_\_\_\_

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt  

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

Amount of Each Receipt this Period  

_____
-------

Memo Item

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

Mailing Address \_\_\_\_\_

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ \_\_\_\_\_

Date of Receipt  

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

Amount of Each Receipt this Period  

_____
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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>33540.41</b>

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. CONNELL, JOHN, , ,</b>		Date of Disbursement MM / DD / YYYY 05 / 26 / 2022	
Mailing Address PO BOX 3743		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1815I</b> Amount of Each Disbursement this Period 2466.00	
City CARMEL	State IN	Zip Code 46082	Category/ Type
Purpose of Disbursement COMMUNICATIONS CONSULTING			
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>B. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 05 / 20 / 2022	
Mailing Address 4333 AMON CARTER BOULEVARD		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1815I</b> Amount of Each Disbursement this Period 449.99	
City FORT WORTH	State TX	Zip Code 76155-2605	Category/ Type
Purpose of Disbursement TRAVEL			
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>C. BROGHAMER CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022	
Mailing Address 502 MONROE ST		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I1811</b> Amount of Each Disbursement this Period 2534.14	
City NEWPORT	State KY	Zip Code 41071-2006	Category/ Type
Purpose of Disbursement COMPLIANCE CONSULTING			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5450.13
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

**A. EC CONSULTING, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 40323

City WASHINGTON State DC Zip Code 20016-2705

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 12 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1811'

Amount of Each Disbursement this Period: 9300.00

Memo Item

**B. FACEBOOK**

Full Name (Last, First, Middle Initial)

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I18104

Amount of Each Disbursement this Period: 900.00

Memo Item

**C. FACEBOOK**

Full Name (Last, First, Middle Initial)

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 02 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1810

Amount of Each Disbursement this Period: 900.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 11100.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. FACEBOOK

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I1810  
Amount of Each Disbursement this Period

900.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. FACEBOOK

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I1810  
Amount of Each Disbursement this Period

900.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. FACEBOOK

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2022

FEC Identification Number

C

Transaction ID : SB21B.I1810  
Amount of Each Disbursement this Period

900.00

Memo Item

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

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

2700.00

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I1810!  
Amount of Each Disbursement this Period  
520.54

Memo Item

Full Name (Last, First, Middle Initial)

**B. FACEBOOK**

Mailing Address 1 HACKER WAY

City MENLO PARK State CA Zip Code 94025

Purpose of Disbursement  
ADVERTISING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 25 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I18154  
Amount of Each Disbursement this Period  
1.59

Memo Item

Full Name (Last, First, Middle Initial)

**C. LIMESTONE STRATEGIES**

Mailing Address 5750 CASTLE CREEK PKWY N DR, SUITE SUITE 367

City INDIANAPOLIS State IN Zip Code 46250

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2022

FEC Identification Number

C  
Transaction ID : SB21B.I1811  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

5522.13

**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)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MAILCHIMP**

Mailing Address 675 PONCE DE LEON AVENUE, NORTHEAS  
STE 5000

City ATLANTA State GA Zip Code 30308

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.I1815**  
Amount of Each Disbursement this Period  
605.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SOCKO STRATEGIES, LLC**

Mailing Address 4323 CATHEDRAL AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.I18113**  
Amount of Each Disbursement this Period  
3500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SOCKO STRATEGIES, LLC**

Mailing Address 4323 CATHEDRAL AVE NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2022

FEC Identification Number

C  
**Transaction ID : SB21B.I1811**  
Amount of Each Disbursement this Period  
3500.00

Memo Item

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

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

7605.00  
32377.26

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. COMMITTEE TO ELECT JENNIFER-RUTH GREEN</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022
Mailing Address PO BOX 243		FEC Identification Number <b>C</b> C00782797 <b>Transaction ID : SB23.I18115</b>
City CROWN POINT	State IN	Zip Code 46308
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>GREEN, JENNIFER-RUTH, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2022	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 01	PRIMARY	

Full Name (Last, First, Middle Initial) <b>B. COMMITTEE TO ELECT JENNIFER-RUTH GREEN</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022
Mailing Address PO BOX 243		FEC Identification Number <b>C</b> C00782797 <b>Transaction ID : SB23.I18119</b>
City CROWN POINT	State IN	Zip Code 46308
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>GREEN, JENNIFER-RUTH, , ,</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2022	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 01	GENERAL	

Full Name (Last, First, Middle Initial) <b>C. DAVE MCCORMICK FOR US SENATE</b>		Date of Disbursement MM / DD / YYYY 05 / 12 / 2022
Mailing Address PO BOX 23215		FEC Identification Number <b>C</b> C00800623 <b>Transaction ID : SB23.I18117</b>
City PITTSBURGH	State PA	Zip Code 15222
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	Amount of Each Disbursement this Period 5000.00
Candidate Name <b>MCCORMICK, DAVE, , ,</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2022	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District:	PRIMARY	

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**OORAH! POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HOUCHIN FOR CONGRESS**

Mailing Address PO BOX 234

City SALEM State IN Zip Code 47167-0234

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**HOUCHIN, ERIN, ,**

Office Sought:  House  Senate  President  
State: IN District: 09  
Disbursement For: 2022  
 Primary  General  
 Other (specify) **GENERAL**

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 12 / 2022

FEC Identification Number

**C** C00800649

**Transaction ID : SB23.I18116**

Amount of Each Disbursement this Period

5000.00
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Memo Item

Full Name (Last, First, Middle Initial)

**B. TED BUDD FOR SENATE**

Mailing Address PO BOX 97127

City RALEIGH State NC Zip Code 27624-7127

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
**BUDD, THEODORE, P, ,**

Office Sought:  House  Senate  President  
State: NC District:  
Disbursement For: 2022  
 Primary  General  
 Other (specify) **PRIMARY**

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 12 / 2022

FEC Identification Number

**C** C00614776

**Transaction ID : SB23.I18118**

Amount of Each Disbursement this Period

5000.00
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Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

**C**

Amount of Each Disbursement this Period

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Memo Item

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

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

10000.00
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25000.00
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