

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) [x] []

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
[X] 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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), Convention (12C), General (12G), Special (12S), Runoff (12R)

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

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 [MM] / [DD] / [YYYY]

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

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="2019"/>	<input type="text" value=""/>	<input type="text" value="30837.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="14270.14"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="440011.00"/>	<input type="text" value="646049.61"/>
(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="454281.14"/>	<input type="text" value="676886.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="238710.74"/>	<input type="text" value="461316.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="215570.40"/>	<input type="text" value="215570.40"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

OORAH! POLITICAL ACTION COMMITTEE

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).....	131400.00	159100.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	131400.00	159100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	299400.00	448500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	430800.00	607600.00
12. Transfers From Affiliated/Other Party Committees.....	6211.00	26449.61
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.....	3000.00	12000.00
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)).....▶	440011.00	646049.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	440011.00	646049.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

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	130294.28	199900.12
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	130294.28	199900.12
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	103916.46	250916.46
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4500.00	10500.00
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)) ..	238710.74	461316.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	238710.74	461316.58

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)	430800.00	607600.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	430800.00	607600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	130294.28	199900.12
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	130294.28	199900.12

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

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

FOR LINE NUMBER: PAGE 6 OF 95
(check only one)

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

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BARNHART, RICHARD, K., ,

Mailing Address 1301 NORTH 31ST STREET

City PHILADELPHIA	State PA	Zip Code 19121-4403
----------------------	-------------	------------------------

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

Name of Employer (for Individual) PENNROSE	Occupation (for Individual) CHAIRMAN AND CEO
---	---

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
09		27		2019

Transaction ID : SA11A.43126

Amount of Each Receipt this Period
500.00

Memo Item CONTRIBUTION

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

Mailing Address 10521 BISHOP CIRCLE

City CARMEL	State IN	Zip Code 46032-8599
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) UROLOGIST
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43078

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

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

Mailing Address 5820 PLAINVIEW RD.

City BETHESDA	State MD	Zip Code 20817-6151
------------------	-------------	------------------------

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

Name of Employer (for Individual) MERIDIAN HILL STRATEGIES	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2019

Transaction ID : SA11A.44728

Amount of Each Receipt this Period
4000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5250.00
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 95
<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)
OORAH! POLITICAL ACTION COMMITTEE

A. BEAM, TERESA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 NORTH 9TH STREET
 City NOBLESVILLE State IN Zip Code 46060-2050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43079
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. BENNETT, RICHARD, M., DR., III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11487 GOLDEN WILLOW COURT
 City ZIONSVILLE State IN Zip Code 46077-1283
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43080
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. BILLMEYER, BRIAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7406 FOREST RIDGE DRIVE
 City SCHERERVILLE State IN Zip Code 46375-3352
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43075
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. BONICELLI, MELISSA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 103 WEST MONROE AVENUE
 City ALEXANDRIA State VA Zip Code 22301-1921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VENN STRATEGIES Occupation (for Individual) GOVERNMENT RELATIONS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 16 / 2019
Transaction ID : SA11A.42904
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. BROADWATER, AMY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1505 DEMONBREUN STREET
 City NASHVILLE State TN Zip Code 37203-3425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUBIN BROWN LLP Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43120
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. COOPER, WILFRED, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17782 SKY PARK CIRCLE
 City IRVINE State CA Zip Code 92614-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNC AND ASSOCIATES Occupation (for Individual) PRESIDENT/CEO/DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43118
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. COOPER, WILFRED, N., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17782 SKY PARK CIRCLE
 City IRVINE State CA Zip Code 92614-6404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WNC AND ASSOCIATES Occupation (for Individual) FOUNDER/CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43119
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. COX, CHRISTOPHER, C., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2205 WINDSOR ROAD
 City ALEXANDRIA State VA Zip Code 22307-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NAVIGATORS GLOBAL, LLC Occupation (for Individual) FOUNDING PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 03 / 2019
Transaction ID : SA11A.43850
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. DAMBLY, MARK, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 354 DARLINGTON ROAD
 City MEDIA State PA Zip Code 19063-5504
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENNROSE Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43127
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1500.00
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 95
<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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DEVILLE, JOHN, W., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 119 LEXINGTON DRIVE			Transaction ID : SA11A.45445
City LOVELAND	State OH	Zip Code 45140-7129	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) HEALTH CAROUSEL		Occupation (for Individual) EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. DEVILLE, SHELLY, K., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2019
Mailing Address 119 LEXINGTON DRIVE			Transaction ID : SA11A.45447
City LOVELAND	State OH	Zip Code 45140-7129	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) HOMEMAKER		Occupation (for Individual) HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DOHENY, NOEL, T., ,			Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 25 / 2019
Mailing Address 12 PETTIT COURT			Transaction ID : SA11A.44763
City POTOMAC	State MD	Zip Code 20854-6007	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer (for Individual) EPIGENOMICS, INC.		Occupation (for Individual) CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional).....	10500.00
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 95
<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)
OORAH! POLITICAL ACTION COMMITTEE

A. EMLEY, TYLER, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18608 MISSISSIPPI STREET

City HEBRON	State IN	Zip Code 46341-9313
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) UROLOGIST
--	--

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
09	/	27	/	2019

Transaction ID : SA11A.43077

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 1776 K STREET, NW

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

Name of Employer (for Individual) CAPITAL KEYA	Occupation (for Individual) CONSULTANT
---	---

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
12	/	03	/	2019

Transaction ID : SA11A.44834

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

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

Mailing Address 2437 LONDONBERRY BOULEVARD

City CARMEL	State IN	Zip Code 46032-8219
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2019

Transaction ID : SA11A.43081

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. GANS, JON, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1304

City ALEXANDRIA	State VA	Zip Code 22313-1304
--------------------	-------------	------------------------

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

Name of Employer (for Individual) POLARIS CONSULTING, LLC	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID : SA11A.44622

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

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

Mailing Address 626 W DAVID RD

City KETTERING	State OH	Zip Code 45429-1339
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ALTERNATE SOLUTIONS HEALTH NETWORK	Occupation (for Individual) CO-CEO
---	---------------------------------------

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
09	/	09	/	2019

Transaction ID : SA11A.42893

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address 14129 CAMINITO VISTANA

City SAN DIEGO	State CA	Zip Code 92130-3722
-------------------	-------------	------------------------

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

Name of Employer (for Individual) EPIGENOMICS AG	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2019

Transaction ID : SA11A.44623

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 95
<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)
OORAH! POLITICAL ACTION COMMITTEE

A. GENDRON, ROGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1711 S STREET NORTHWEST
 City WASHINGTON State DC Zip Code 20009-6117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SILVER STREET DEVELOPMENT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2019
Transaction ID : SA11A.42889
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. GILLEY, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 EAST 44TH STREET
 City INDIANAPOLIS State IN Zip Code 46205-1707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43082
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. HALLAWAY, RASHID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2638 HAMPTON AVE
 City CHARLOTTE State NC Zip Code 28207-2522
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HHQ VENTURES, LLC Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 26 / 2019
Transaction ID : SA11A.42778
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. HAMILTON, GREGORY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2830 WATERFRONT AVENUE
 City ALGONQUIN State IL Zip Code 60102-6835
 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 ▼ 3000.00

Date of Receipt 11 / 25 / 2019
Transaction ID : SA11A.44765
 Amount of Each Receipt this Period 3000.00
 Memo Item CONTRIBUTION

B. HAMILTON, GREGORY, K., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 8472
 City RANCHO SANTA FE State CA Zip Code 92067-8472
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EPIGENOMICS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 25 / 2019
Transaction ID : SA11A.44764
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. HENKEL, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 462 BARCLAY ROAD
 City BRYN MAWR State PA Zip Code 19010-1218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PENNROSE Occupation (for Individual) PRINCIPAL AND SENIOR VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43125
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 8500.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

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

Mailing Address 220 CEDARBROOK ROAD

City ARDMORE	State PA	Zip Code 19003-1702
-----------------	-------------	------------------------

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

Name of Employer (for Individual) INDEPENDENCE BLUE CROSS	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2019

Transaction ID : SA11A.44762

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

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

Mailing Address 127 BLUEWATER CIRCLE

City NEWPORT	State NC	Zip Code 28570-5075
-----------------	-------------	------------------------

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

Name of Employer (for Individual) MEHLMAN CASTAGNETTI ROSEN & THOMAS	Occupation (for Individual) CONSULTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	06	/	2019

Transaction ID : SA11A.42786

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

C. HOLLENSBE, DAVID, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11715 CROSSFIELDS DRIVE

City CARMEL	State IN	Zip Code 46032-8929
----------------	-------------	------------------------

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

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2019

Transaction ID : SA11A.43109

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2750.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. IRIZARRY, STEVEN, E., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2144 N. POLLARD ST.

City ARLINGTON	State VA	Zip Code 22207-3812
-------------------	-------------	------------------------

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

Name of Employer (for Individual) ROBERTI GLOBAL	Occupation (for Individual) MANAGING PARTNER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2019

Transaction ID : SA11A.42747

Amount of Each Receipt this Period
1500.00

Memo Item CONTRIBUTION

B. KENNEDY, LAWRENCE, T., , JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1267 MICHIGAN AVENUE

City CINCINNATI	State OH	Zip Code 45208-2757
--------------------	-------------	------------------------

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

Name of Employer (for Individual) HEALTH CAROUSEL	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11A.45446

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

C. KENNEDY, LAWRENCE, T., , SR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8477 BAY COLONY DRIVE #901

City NAPLES	State FL	Zip Code 34108-0744
----------------	-------------	------------------------

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
12		31		2019

Transaction ID : SA11A.45443

Amount of Each Receipt this Period
5000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. KIMBELL, JEFFREY, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 13TH STREET NW, SUITE 650 NORT
 City WASHINGTON State DC Zip Code 20005-3807
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) HEALTH CARE CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 25 / 2019
Transaction ID : SA11A.44771
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. LARGE, MICHAEL, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2119 FINCHLEY ROAD
 City CARMEL State IN Zip Code 46032-7291
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43107
 Amount of Each Receipt this Period 800.00
 Memo Item CONTRIBUTION

C. LUDWIG, AARON, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7230 NORTH WASHINGTON BOULEVARD
 City INDIANAPOLIS State IN Zip Code 46240-3051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43083
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 2550.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. MAGEE, CHRIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5862 EAST FALL CREEK PARKWAY NORTH
 City INDIANAPOLIS State IN Zip Code 46226-1051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43084
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. MARTIN, BENJAMIN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 130 RED OAK COURT
 City CARMEL State IN Zip Code 46033-1967
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43085
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. MCCLELLAND, S., ERIC, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 155 N WACKER DRIVE SUITE 466
 City CHICAGO State IL Zip Code 60606-1787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RED STONE EQUITY PARTNERS Occupation (for Individual) PRESIDENT/FOUNDER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 27 / 2019
Transaction ID : SA11A.42837
 Amount of Each Receipt this Period 1500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
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 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
OORAH! POLITICAL ACTION COMMITTEE

A. MCDANIEL, MALLOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 906 BEVERLEY DRIVE
 City ALEXANDRIA State VA Zip Code 22302-2205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST FRONT STRATEGIES Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **11 / 18 / 2019**
Transaction ID : SA11A.44627
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

B. MEHLMAN, BRUCE, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6629 LYBROOK CT
 City BETHESDA State MD Zip Code 20817-3029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEHLMAN CASTAGNETTI ROSEN & THOMAS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **07 / 26 / 2019**
Transaction ID : SA11A.42781
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. MOORHOUSE, MARK, S., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 505 S WILLOW DR.
 City ORONO State MN Zip Code 55356-9373
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DOMINIUM Occupation (for Individual) DEVELOPMENT AND ACQUISITIONS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 27 / 2019**
Transaction ID : SA11A.42843
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	3500.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. MORTIER, JEFFREY, CHARLES, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4948 ESKRIDGE TERRACE NORTHWEST
 City WASHINGTON State DC Zip Code 20016-3443
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FARRAGUT PARTNERS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **11 / 25 / 2019**
Transaction ID : SA11A.44761
 Amount of Each Receipt this Period 2000.00
 Memo Item
 CONTRIBUTION

B. MURPHY, KATHERINE, CASEY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1701 16TH ST NW
 City WASHINGTON State DC Zip Code 20009-3145
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PCMA Occupation (for Individual) ASSISTANT VICE PRESIDENT, FEDE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 30 / 2019**
Transaction ID : SA11A.43669
 Amount of Each Receipt this Period 1000.00
 Memo Item
 CONTRIBUTION

C. MYERS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 I-49 N SERVICE RD
 City SUNSET State LA Zip Code 70584-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE LHC GROUP Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 03 / 2019**
Transaction ID : SA11A.43859
 Amount of Each Receipt this Period 5400.00
 Memo Item
 CONTRIBUTION
 SEE REATTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8400.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. MYERS, GINGER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 I-49 N SERVICE RD.
 City SUNSET State LA Zip Code 70584-
 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2019
Transaction ID : SA11A.44832
 Amount of Each Receipt this Period
 400.00
 Memo Item CONTRIBUTION
 REATTRIBUTION FROM SPOUSE

B. MYERS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 402 I-49 N SERVICE RD
 City SUNSET State LA Zip Code 70584-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **THE LHC GROUP** Occupation (for Individual) **PRESIDENT**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 02 / 2019
Transaction ID : SA11A.44833
 Amount of Each Receipt this Period
 - 400.00
 Memo Item CONTRIBUTION
 REATTRIBUTION TO SPOUSE

C. MYERS, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 245 MURTHA STREET
 City ALEXANDRIA State VA Zip Code 22304-8602
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **LHC GROUP** Occupation (for Individual) **VP GOVERNMENT AFFAIRS**
 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
 09 / 27 / 2019
Transaction ID : SA11A.43106
 Amount of Each Receipt this Period
 500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. NELSON, KATHRYN, O., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 EAST ROOKWOOD DRIVE
 City CINCINNATI State OH Zip Code 45208-3375
 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 ▼ 5000.00

Date of Receipt **12 / 31 / 2019**
Transaction ID : SA11A.45444
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. NEY, CHYRISE, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 720 SOUTH RANGELINE ROAD APT 422
 City CARMEL State IN Zip Code 46032-3072
 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 ▼ 750.00

Date of Receipt **09 / 27 / 2019**
Transaction ID : SA11A.43108
 Amount of Each Receipt this Period 750.00
 Memo Item
CONTRIBUTION

C. ORRIS, BRADLEY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12967 WATER RIDGE DRIVE
 City MCCORDSVILLE State IN Zip Code 46055-9650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) **UROLOGY OF INDIANA** Occupation (for Individual) **UROLOGIST**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt **09 / 27 / 2019**
Transaction ID : SA11A.43086
 Amount of Each Receipt this Period 750.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. ORRIS, BRADLEY, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12967 WATER RIDGE DRIVE
 City MCCORDSVILLE State IN Zip Code 46055-9650
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1450.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43103
 Amount of Each Receipt this Period 700.00
 Memo Item CONTRIBUTION

B. PERLMUTTER, ADAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 87 HAWICK DRIVE
 City VALPARAISO State IN Zip Code 46385-9331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43128
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. PIKE, SCOTT, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10682 WINTERWOOD
 City CARMEL State IN Zip Code 46032-9688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43087
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1950.00
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 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. RAMSEY, JOHN, C., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12734 DEVON LANE

City CARMEL	State IN	Zip Code 46032-9448
----------------	-------------	------------------------

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

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43102

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

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

Mailing Address 1834 REDWOOD LANE

City MUNSTER	State IN	Zip Code 46321-5161
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) UROLOGIST
--	--

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
09		27		2019

Transaction ID : SA11A.43076

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. RAYBOURN, JAMES, H., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7521 PATRIOT COURT

City ZIONSVILLE	State IN	Zip Code 46077-7616
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43088

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
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 25 OF 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
OORAH! POLITICAL ACTION COMMITTEE

A. ROGERS, KRISTI, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1306 SKIPWITH RD
 City MCLEAN State VA Zip Code 22101-1834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) STRATEGIC BUSINESS DEVELOPME
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43114
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. RUSCKOWSKI, STEPHEN, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 COVENTRY LANE
 City ANDOVER State MA Zip Code 01810-2235
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) QUEST DIAGNOSTICS Occupation (for Individual) CHAIRMAN, PRESIDENT & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 26 / 2019
Transaction ID : SA11A.42783
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

C. SALTZSTEIN, DANIEL, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 PALACE PLACE DRIVE
 City SAN ANTONIO State TX Zip Code 78248-1559
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY SAN ANTONIO Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43071
 Amount of Each Receipt this Period 2500.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
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 26 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. SALVAS, DANIEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6335 AROUND THE HILLS RD.
 City INDIANAPOLIS State IN Zip Code 46226-1001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43104
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. SCHEIDLER, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4982 WOODFIELD DRIVE
 City CARMEL State IN Zip Code 46033-9427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 07 / 2019
Transaction ID : SA11A.43924
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. SCHLUETER, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11551 WILLOW SPRINGS DRIVE
 City ZIONSVILLE State IN Zip Code 46077-7830
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43089
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2250.00
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 27 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. SCHWAB, CHARLES, WILLIAM, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6240 STONEGATE LANE
 City ZIONSVILLE State IN Zip Code 46077-8264
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43090
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

B. SCOTT, JOHN, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3693 WALDEN PLACE
 City CARMEL State IN Zip Code 46033-4324
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY OF INDIANA Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43091
 Amount of Each Receipt this Period 750.00
 Memo Item CONTRIBUTION

C. SHINTO, RICHARD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 CHARDON AVE. SUITE 500
 City SAN JUAN State PR Zip Code 00918-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INNOVACARE Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 25 / 2019
Transaction ID : SA11A.44760
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2500.00
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 28 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. SINITO, FRANK, T., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4000 KEY TOWER
 127 PUBLIC SQUARE
 City CLEVELAND State OH Zip Code 44114-1217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MILLENNIA HOUSING PROJECT Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43123
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

B. SMITH, JEFFREY, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX342
 City COLUMBIA State MO Zip Code 65205-0342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JES HOLDINGS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 03 / 2019
Transaction ID : SA11A.43853
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

C. SMITH, THEODORE, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 EAST ROOKWOOD DRIVE
 City CINCINNATI State OH Zip Code 45208-3375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS Occupation (for Individual) INFORMATION REQUESTED PER BES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2019
Transaction ID : SA11A.45448
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00
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 29 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. SPRENGARD, AMBRE, BURKE, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 EAST ROOKWOOD DRIVE

City CINCINNATI	State OH	Zip Code 45208-3362
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SR DIRECTOR OF GOV AFFAIRS	Occupation (for Individual) HEALTH CAROUSEL
---	--

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
07		26		2019

Transaction ID : SA11A.42782

Amount of Each Receipt this Period
2500.00

Memo Item CONTRIBUTION

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

Mailing Address 6006 HILLSIDE ABE WEST DR.

City INDIANAPOLIS	State IN	Zip Code 46220-
----------------------	-------------	--------------------

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

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43092

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

C. SUH, RONALD, S., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6717 EAST STONEGATE DRIVE

City ZIONSVILLE	State IN	Zip Code 46077-8594
--------------------	-------------	------------------------

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

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43093

Amount of Each Receipt this Period
750.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4000.00
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 30 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. TOMPKINS, ELENA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3042 DENT PLACE NORTHWEST
 City WASHINGTON State DC Zip Code 20007-2915
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TOMPKINS STRATEGIES LLC Occupation (for Individual) LOBBYIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **11 / 25 / 2019**
Transaction ID : SA11A.44778
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

B. UNNI, RAMESH, , DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8812 WINDING TRAIL
 City SAINT JOHN State IN Zip Code 46373-8778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **09 / 27 / 2019**
Transaction ID : SA11A.43074
 Amount of Each Receipt this Period 500.00
 Memo Item
CONTRIBUTION

C. VASSAR, GEORGE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 709 WILTSHIRE AVENUE
 City SAN ANTONIO State TX Zip Code 78209-5439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UROLOGY SAN ANTONIO Occupation (for Individual) UROLOGIST
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **09 / 27 / 2019**
Transaction ID : SA11A.43072
 Amount of Each Receipt this Period 2500.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4000.00
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 31 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. VAUGHT, JEFFREY, D., DR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2049 EAGLE TRACE DRIVE

City GREENWOOD	State IN	Zip Code 46143-8252
-------------------	-------------	------------------------

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

Name of Employer (for Individual) UROLOGY OF INDIANA	Occupation (for Individual) UROLOGIST
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43101

Amount of Each Receipt this Period
750.00

Memo Item
CONTRIBUTION

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

Mailing Address 5122 26TH STREET NORTH

City ARLINGTON	State VA	Zip Code 22207-2636
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WELSH ROSE, LLC	Occupation (for Individual) FOUNDING PARTNER
--	---

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
09		27		2019

Transaction ID : SA11A.43105

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

C. YALOWITZ, BRUCE, R., , M.D.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8347 CASTLE DRIVE

City MUNSTER	State IN	Zip Code 46321-1932
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COMMUNITY HOSPITAL	Occupation (for Individual) UROLOGIST
---	--

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
09		27		2019

Transaction ID : SA11A.43073

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 32 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. HOUSING TRUST GROUP, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3225 AVIATION AVENUE

City MIAMI	State FL	Zip Code 33133-4741
---------------	-------------	------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2019

Transaction ID : SA11A.43099

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

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

Mailing Address 2527 S. BAYSHORE DRIVE, APT. 12B

City COCONUT GROVE	State FL	Zip Code 33133-4704
-----------------------	-------------	------------------------

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

Name of Employer (for Individual) HOUSING TRUST GROUP, LLC	Occupation (for Individual) PRESIDENT & CEO
---	--

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
09		27		2019

Transaction ID : SA11A.44930

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

PARTNERSHIP ATTRIBUTION

C. LAW OFFICES OF FREDERICK H GRAEFE PLLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 CONSTITUTION AVENUE NORTHEAST

City WASHINGTON	State DC	Zip Code 20002-5913
--------------------	-------------	------------------------

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
09		27		2019

Transaction ID : SA11A.43117

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 33 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. GRAEFE, FREDERICK, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 319 CONSTITUTION AVENUE NORTHEAST
 City WASHINGTON State DC Zip Code 20002-5913
 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 09 / 27 / 2019
Transaction ID : SA11A.43130
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION
 PARTNERSHIP ATTRIBUTION

B. PECHANGA BAND OF LUISENO INDIANS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 1477
 City TEMECULA State CA Zip Code 92593-1477
 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 ▼ 5000.00

Date of Receipt 12 / 31 / 2019
Transaction ID : SA11A.45803
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. POARCH BAND OF CREEK INDIANS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5811 JACK SPRINGS ROAD
 City ATMORE State AL Zip Code 36502-5025
 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 ▼ 5000.00

Date of Receipt 09 / 27 / 2019
Transaction ID : SA11A.43115
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 34 OF 95
	<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)
OORAH! POLITICAL ACTION COMMITTEE

A. POKAGON BAND OF POTAWATOMI INDIANS

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

Mailing Address 58620 SINK ROAD

City DOWAGIAC	State MI	Zip Code 49047-9329
------------------	-------------	------------------------

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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	16	/	2019

Transaction ID : SA11A.44932

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. YOCHA DEHE WINTUN NATION

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

Mailing Address P.O. BOX 18

City BROOKS	State CA	Zip Code 95606-0018
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00459255

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11A.45802

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NATIONAL ASSOCIATION OF BROADCASTERS PAC

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

Mailing Address 1771 N STREET NW

City WASHINGTON	State DC	Zip Code 20036-2800
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	30	/	2019

Transaction ID : SA11C.42883

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS ABOVE ITEMIZATION THRESHOLD

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 35 OF 95
<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)
OORAH! POLITICAL ACTION COMMITTEE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TARZIAN, THOMAS, N., MR.,

Mailing Address **1100 S. HIGH STREET**

City BLOOMINGTON	State IN	Zip Code 47401-6108
----------------------------	--------------------	-------------------------------

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

Name of Employer (for Individual) SARKES TARZIAN INC.	Occupation (for Individual) MANAGER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
08 / 30 / 2019

Transaction ID : SA11A.42884

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

EARMARKED FROM NATIONAL ASSOCIATION OF BROADCASTERS PAC

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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	131400.00

**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 36 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. ABBOTT LABORATORIES EMPLOYEE PAC

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

Mailing Address 100 ABBOTT PARK ROAD
D312

City ABBOTT PARK State IL Zip Code 60064-3502

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2019

Transaction ID : SA11C.42777

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. ABBOTT LABORATORIES EMPLOYEE PAC

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

Mailing Address 100 ABBOTT PARK ROAD
D312

City ABBOTT PARK State IL Zip Code 60064-3502

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 20 / 2019

Transaction ID : SA11C.45132

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. ABIOMED INC. PAC

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

Mailing Address 22 CHERRY HILL DRIVE

City DANVERS State MA Zip Code 01923-2575

FEC ID number of contributing federal political committee. **C** C00426445

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
10 / 03 / 2019

Transaction ID : SA11C.43854

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 37 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. ADVANCED MEDICAL TECHNOLOGY ASSOCIATION PAC

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

Mailing Address 701 PENNSYLVANIA AVENUE NW
SUITE 800

City WASHINGTON State DC Zip Code 20004-2654

FEC ID number of contributing federal political committee. **C** C00340356

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt
08 / 27 / 2019
Transaction ID : SA11C.42844

Amount of Each Receipt this Period
1850.00

Memo Item
CONTRIBUTION

B. AFLAC PAC

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

Mailing Address 1932 WYNNTON ROAD

City COLUMBUS State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
08 / 27 / 2019
Transaction ID : SA11C.42846

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AFLAC PAC

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

Mailing Address 1932 WYNNTON ROAD

City COLUMBUS State GA Zip Code 31999-0001

FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 24 / 2019
Transaction ID : SA11C.44349

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6850.00
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 38 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AIR LINE PILOTS ASSOCIATION INT'L PAC

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

Mailing Address 1625 MASSACHUSETTS AVENUE NW

City WASHINGTON	State DC	Zip Code 20036-2212
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00035451

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
07	/	01	/	2019

Transaction ID : SA11C.42592

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AIR METHODS CORPORATION PAC - AMPAC

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

Mailing Address P.O. BOX 4682

City ENGLEWOOD	State CO	Zip Code 80155-4682
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00529909

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11C.45459

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. ALLSTATE INSURANCE CO. PAC - ALLPAC

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

Mailing Address 2775 SANDERS ROAD
STE. A2W

City NORTHBROOK	State IL	Zip Code 60062-6110
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040253

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
09	/	27	/	2019

Transaction ID : SA11C.43122

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
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 39 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. ALSTON & BIRD PAC - ALSTON BIRD PAC

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

Mailing Address 950 F STREET NW
BLDG.

City WASHINGTON State DC Zip Code 20004-1438

FEC ID number of contributing federal political committee. **C** C00395723

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
07 / 01 / 2019

Transaction ID : SA11C.42591

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. ALTRIA GROUP, INC. PAC

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

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400W

City WASHINGTON State DC Zip Code 20001-2155

FEC ID number of contributing federal political committee. **C** C00089136

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
08 / 12 / 2019

Transaction ID : SA11C.42818

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

C. AMEDISYS INC PAC

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

Mailing Address 5959 S SHERWOOD FOREST BOULEVARD

City BATON ROUGE State LA Zip Code 70816-6038

FEC ID number of contributing federal political committee. **C** C00436360

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
09 / 27 / 2019

Transaction ID : SA11C.43112

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
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 40 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1445 NEW YORK AVENUE NW SUITE 800

City WASHINGTON	State DC	Zip Code 20005-2125
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00359539

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.45455

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. AMERICAN BEVERAGE ASSOCIATION PAC - AMERICAN BEVERAGE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1275 PENNSYLVANIA AVE NW SUITE 1100

City WASHINGTON	State DC	Zip Code 20004-2417
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00100107

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2019

Transaction ID : SA11C.43116

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. AMERICAN BANKERS ASSOCIATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1120 CONNECTICUT AVENUE NW SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

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
11	/	25	/	2019

Transaction ID : SA11C.44756

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11500.00
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 41 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AMERICAN CLINICAL LABORATORY ASSOCIATION PAC - LABPAC

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

Mailing Address 1100 NEW YORK AVENUE, NW
SUITE 725 WEST

City WASHINGTON State DC Zip Code 20005-6172

FEC ID number of contributing federal political committee. **C** C00410084

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
07 / 16 / 2019

Transaction ID : SA11C.42742

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC - AIC

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

Mailing Address 220 LEIGH FARM ROAD
PALLADIAN 1

City DURHAM State NC Zip Code 27707-8110

FEC ID number of contributing federal political committee. **C** C00077321

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID : SA11C.45457

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. AMERICAN PODIATRIC MEDICAL ASSOCIATION PAC

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

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814-1621

FEC ID number of contributing federal political committee. **C** C00008839

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID : SA11C.45454

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 42 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AMERICAS HEALTH INSURANCE PLANS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 PENNSYLVANIA AVENUE, NW
 SOUTH BUILDING, SUITE 500
 City WASHINGTON State DC Zip Code 20004-2601
 FEC ID number of contributing federal political committee. **C** C00106740
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 12 / 31 / 2019
Transaction ID : SA11C.45450
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. ASSOCIATION OF AMERICAN RAILROADS PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 3RD STREET, S..W.
 SUITE 1000
 City WASHINGTON State DC Zip Code 20024-3228
 FEC ID number of contributing federal political committee. **C** C00280743
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2019
Transaction ID : SA11C.45530
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

C. ASSURED GUARANTY MUNICIPAL CORP POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1633 BROADWAY
 City NEW YORK State NY Zip Code 10019-6708
 FEC ID number of contributing federal political committee. **C** C00685958
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 25 / 2019
Transaction ID : SA11C.44758
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 43 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

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

Mailing Address 1625 PRINCE STREET
SUITE 225

City ALEXANDRIA State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee. **C** C00250399

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
08 / 16 / 2019

Transaction ID : SA11C.42821

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. BERKSHIRE HATHAWAY ENERGY COMPANY PAC

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

Mailing Address 666 GRAND AVENUE
P.O. BOX 657

City DES MOINES State IA Zip Code 50309-2506

FEC ID number of contributing federal political committee. **C** C00324483

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2019

Transaction ID : SA11C.43124

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. BGR PAC

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

Mailing Address 601 13TH STREET NW
FLOOR 11

City WASHINGTON State DC Zip Code 20005-3822

FEC ID number of contributing federal political committee. **C** C00359588

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1550.00

Date of Receipt
MM / DD / YYYY
12 / 01 / 2019

Transaction ID : SA11C.44931

Amount of Each Receipt this Period
1550.00

Memo Item
CONTRIBUTION
FACILITY RENTAL/CATERING

SUBTOTAL of Receipts This Page (optional).....	8050.00
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 44 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. BNSF RAILWAY COMPANY RAILPAC

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

Mailing Address PO BOX 961039

City FORT WORTH	State TX	Zip Code 76161-0039
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00235739

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

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

Transaction ID : SA11C.45456

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

B. BOSTON SCIENTIFIC CORPORATION PAC

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

Mailing Address 300 BOSTON SCIENTIFIC WAY

City MARLBOROUGH	State MA	Zip Code 01752-1291
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00357863

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
09	/	27	/	2019

Transaction ID : SA11C.43129

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. BUILD PAC OF THE NATIONAL ASSOCIATION OF HOME BUILDERS

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

Mailing Address 1201 15TH STREET NW

City WASHINGTON	State DC	Zip Code 20005-2899
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000901

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	26	/	2019

Transaction ID : SA11C.45067

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 45 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. BWX TECHNOLOGIES, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2016 MT. ATHOS RD

City LYNCHBURG	State VA	Zip Code 24504-5447
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00365502

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2019

Transaction ID : SA11C.42850

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. CAMBIA HEALTH SOLUTIONS INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 SW MARKET ST.
PO BOX 1271 MS E12C

City PORTLAND	State OR	Zip Code 97201-5715
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00252684

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
11	/	25	/	2019

Transaction ID : SA11C.44770

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1680 CAPITAL ONE DRIVE

City MCLEAN	State VA	Zip Code 22102-3407
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00326595

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
09	/	27	/	2019

Transaction ID : SA11C.43097

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 46 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. CENTENE CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7700 FORSYTH BLVD.

City ST. LOUIS	State MO	Zip Code 63105-1807
FEC ID number of contributing federal political committee. C C00397851		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2019
Transaction ID : SA11C.44926

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. CIGNA CORPORATION POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 720

City WASHINGTON	State DC	Zip Code 20004-2626
FEC ID number of contributing federal political committee. C C00085316		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2019
Transaction ID : SA11C.42885

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. COHNREZNICK PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7501 WISCONSIN AVENUE
SUITE 400E

City BETHESDA	State MD	Zip Code 20814-6583
FEC ID number of contributing federal political committee. C C00547216		
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2019
Transaction ID : SA11C.42886

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 47 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. COMCAST CORPORATION & NBC UNIVERSAL PAC

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

Mailing Address 1701 JOHN F. KENNEDY BOULEVARD
ONE COMCAST CENTER

City PHILADELPHIA	State PA	Zip Code 19103-2833
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00248716

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
07	/	01	/	2019

Transaction ID : SA11C.42590

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. CONSUMER TECHNOLOGY ASSOCIATION PAC

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

Mailing Address 1919 S. EADS STREET

City ARLINGTON	State VA	Zip Code 22202-3028
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00375048

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

Transaction ID : SA11C.45134

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. CONTURA ENERGY, INC. PAC

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

Mailing Address 340 MARTIN LUTHER KING JR. BLVD
PO BOX 848

City BRISTOL	State TN	Zip Code 37620-4081
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00650598

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2019

Transaction ID : SA11C.42848

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 48 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 10 BURTON HILLS BLVD.

City NASHVILLE	State TN	Zip Code 37215-6105
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00366468

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	27	/	2019

Transaction ID : SA11C.42845

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. COUNCIL OF INSURANCE AGENTS & BROKERS PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 PENNSYLVANIA AVE NW STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00039578

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
07	/	26	/	2019

Transaction ID : SA11C.42779

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. COX ENTERPRISES PAC COXPAC INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 975 F STREET NW SUITE 300

City WASHINGTON	State DC	Zip Code 20004-1459
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00477653

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
07	/	26	/	2019

Transaction ID : SA11C.42780

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	6000.00
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 49 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Mailing Address 3815 RIVER CROSSING PARKWAY
SUITE 300

City INDIANAPOLIS	State IN	Zip Code 46240-7767
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00451518

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 27 / 2019

Transaction ID : SA11C.42851

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address 32275 32ND AVE, S.

City FEDERAL WAY	State WA	Zip Code 98001-9616
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FEC ID number of contributing federal political committee. **C** C00340943

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt
MM / DD / YYYY
12 / 09 / 2019

Transaction ID : SA11C.44921

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. DUKE ENERGY CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 550 S. TRYON STREET DEC37D

City CHARLOTTE	State NC	Zip Code 28202-4200
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00083535

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
07 / 09 / 2019

Transaction ID : SA11C.42727

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
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 50 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. DYKEMA GOSSETT FEDERAL PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 201 TOWNSEND STREET
SUITE 900

City LANSING	State MI	Zip Code 48933-1529
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00342113

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2019

Transaction ID : SA11C.43096

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. ECHOSTAR CORP. AND DISH NETWORK CORP. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1110 VERMONT AVENUE NW SUITE 750

City WASHINGTON	State DC	Zip Code 20005-6322
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00330647

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

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

Transaction ID : SA11C.44925

Amount of Each Receipt this Period
3000.00

Memo Item
CONTRIBUTION

C. ENCOMPASS HEALTH CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9001 LIBERTY PARKWAY

City BIRMINGHAM	State AL	Zip Code 35242-7509
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00414649

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
09	/	27	/	2019

Transaction ID : SA11C.43100

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 51 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. FEDEX CORPORATION PAC - FEDEXPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 942 S. SHADY GROVE ROAD 1ST FL.

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

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
09	/	27	/	2019

Transaction ID : SA11C.43098

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. FEDEX CORPORATION PAC - FEDEXPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 942 S. SHADY GROVE ROAD 1ST FL.

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.44920

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. FEDEX CORPORATION PAC - FEDEXPAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 942 S. SHADY GROVE ROAD 1ST FL.

City MEMPHIS	State TN	Zip Code 38120-4117
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

Transaction ID : SA11C.45133

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 52 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. FRESENIUS MEDICAL CARE NORTH AMERICA PAC

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

Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 255

City WASHINGTON State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 01 / 2019
Transaction ID : SA11C.44387

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. FRESENIUS MEDICAL CARE NORTH AMERICA PAC

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

Mailing Address 801 PENNSYLVANIA AVENUE NW
SUITE 255

City WASHINGTON State DC Zip Code 20004-3637

FEC ID number of contributing federal political committee. **C** C00401299

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 25 / 2019
Transaction ID : SA11C.44769

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. FRIENDS OF COMMUNITY ONCOLOGY PAC

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

Mailing Address 760 LYNNHAVEN PKWY
SUITE 150

City VIRGINIA BEACH State VA Zip Code 23452-7492

FEC ID number of contributing federal political committee. **C** C00383976

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 09 / 2019
Transaction ID : SA11C.44924

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 53 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. GENERAL ELECTRIC COMPANY PAC

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

Mailing Address 1299 PENNSYLVANIA AVENUE NW
SUITE 900W

City WASHINGTON State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

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

Transaction ID : SA11C.45522

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. GOOGLE INC. NETPAC

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

Mailing Address 25 MASSACHUSETTS AVE NW
9TH FLOOR

City WASHINGTON State DC Zip Code 20001-1430

FEC ID number of contributing federal political committee. **C** C00428623

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
10 / 07 / 2019

Transaction ID : SA11C.43925

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. H&R BLOCK INC. PAC - BLOCKPAC

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

Mailing Address 1 H AND R BLOCK WAY

City KANSAS CITY State MO Zip Code 64105-1905

FEC ID number of contributing federal political committee. **C** C00188177

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2019

Transaction ID : SA11C.42887

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 54 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. HONEYWELL INTERNATIONAL PAC

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

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 500

City WASHINGTON State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2019

Transaction ID : SA11C.44516

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HUMANA INC. PAC

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

Mailing Address 975 F STREET NW
SUITE 550

City WASHINGTON State DC Zip Code 20004-1458

FEC ID number of contributing federal political committee. **C** C00271007

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2019

Transaction ID : SA11C.45452

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. IHEARTMEDIA, INC. PAC

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

Mailing Address 20880 STONE OAK PARKWAY

City SAN ANTONIO State TX Zip Code 78258-7460

FEC ID number of contributing federal political committee. **C** C00279216

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
10 / 24 / 2019

Transaction ID : SA11C.44346

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	11000.00
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 55 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 20 F STREET, NW SUITE 610

City WASHINGTON	State DC	Zip Code 20001-6707
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00022343

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
08	/	27	/	2019

Transaction ID : SA11C.42852

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. INDEPENDENT COMMUNITY BANKERS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1615 L. STREET NW SUITE 900

City WASHINGTON	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032698

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2019

Transaction ID : SA11C.44766

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

C. JACKSON HLDNGS JACKSON NATL LIFE SEPARATE SEGREGATED FUNDS J

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1 CORPORATE WAY

City LANSING	State MI	Zip Code 48951-1001
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00254953

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
10	/	24	/	2019

Transaction ID : SA11C.44347

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
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 56 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. JUUL LABS, INC. EMPLOYEES PAC

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

Mailing Address 1000 F STREET, NW
8TH FLOOR

City WASHINGTON State DC Zip Code 20004-1501

FEC ID number of contributing federal political committee. **C** C00674242

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
 12 / 09 / 2019

Transaction ID : SA11C.44923

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. KELLEY DRYE & WARREN POLITICAL ACTION COMMITTEE

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

Mailing Address 3050 K STREET NW SUITE 400

City WASHINGTON State DC Zip Code 20007-5100

FEC ID number of contributing federal political committee. **C** C00301929

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 / D D / Y Y Y Y
 07 / 16 / 2019

Transaction ID : SA11C.42740

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. KIDNEY CARE PARTNERS PAC

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

Mailing Address 2020 PENNSYLVANIA AVENUE
BOX 301

City WASHINGTON State DC Zip Code 20006-1811

FEC ID number of contributing federal political committee. **C** C00431924

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
 12 / 12 / 2019

Transaction ID : SA11C.44979

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12000.00
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 57 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. KOCH INDUSTRIES, INC. PAC

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

Mailing Address 4111 EAST 37TH STREET NORTH

City WICHITA	State KS	Zip Code 67220-3203
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00236489

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
11	/	21	/	2019

Transaction ID : SA11C.44730

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. KPMG PAC

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

Mailing Address P.O. BOX 18254

City WASHINGTON	State DC	Zip Code 20036-8254
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	09	/	2019

Transaction ID : SA11C.42728

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. LABORATORY CORPORATION OF AMERICA HOLDINGS PAC

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

Mailing Address 231 MAPLE AVE

City BURLINGTON	State NC	Zip Code 27215-5848
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00314997

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
07	/	16	/	2019

Transaction ID : SA11C.42741

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 58 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. LOUISIANA HEALTH CARE GROUP EMPLOYEE FEDERAL POLITICAL ACTIO

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

Mailing Address 420 W. PINHOOK ROAD
SUITE A

City LAFAYETTE State LA Zip Code 70503-2131

FEC ID number of contributing federal political committee. **C** C00382796

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2019

Transaction ID : SA11C.43111

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. MARATHON PETROLEUM CORPORATION EMPLOYEES PAC

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

Mailing Address PO BOX 75000

City DETROIT State MI Zip Code 48275-0001

FEC ID number of contributing federal political committee. **C** C00496307

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
12 / 31 / 2019

Transaction ID : SA11C.45425

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

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

Mailing Address 3720 159TH AVENUE, NORTHEAST
BUILDING 34, ROOM 4677

City REDMOND State WA Zip Code 98052-6306

FEC ID number of contributing federal political committee. **C** C00227546

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2019

Transaction ID : SA11C.42739

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 59 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. MOLINA HEALTHCARE, INC. PAC

Mailing Address 200 OCEANGATE
SUITE 100

City LONG BEACH State CA Zip Code 90802-4317

FEC ID number of contributing federal political committee. **C** C00430256

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 09 / 2019

Transaction ID : SA11C.44922

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 M STREET, NW
5TH FLOOR

City WASHINGTON State DC Zip Code 20036-3572

FEC ID number of contributing federal political committee. **C** C00004812

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
11 / 25 / 2019

Transaction ID : SA11C.44768

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. NATIONAL ASSOCIATION OF BROADCASTERS PAC

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036-2800

FEC ID number of contributing federal political committee. **C** C00009985

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
6000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2019

Transaction ID : SA11C.42847

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	12500.00
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 60 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

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

Mailing Address 3601 VINCENNES ROAD
PO BOX 68700

City INDIANAPOLIS State IN Zip Code 46268-1154

FEC ID number of contributing federal political committee. **C** C00170258

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4000.00

Date of Receipt
09 / 05 / 2019
Transaction ID : SA11C.42888

Amount of Each Receipt this Period
4000.00

Memo Item
CONTRIBUTION

B. NATIONAL ASSOC. OF REAL ESTATE INVESTMENT TRUSTS, INC. PAC

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

Mailing Address 1875 I STREET NW
SUITE 600

City WASHINGTON State DC Zip Code 20006-5413

FEC ID number of contributing federal political committee. **C** C00303339

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 20 / 2019
Transaction ID : SA11C.42913

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NATIONAL ASSOCIATION FOR HOME CARE POLITICAL ACTION COMMITTEE

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

Mailing Address 228 7TH ST SE

City WASHINGTON State DC Zip Code 20003-4306

FEC ID number of contributing federal political committee. **C** C00188987

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 27 / 2019
Transaction ID : SA11C.43095

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9000.00
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 61 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. NATIONAL APARTMENT ASSOCIATION PAC

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

Mailing Address 4300 WILSON BOULEVARD
SUITE 400

City ARLINGTON State VA Zip Code 22203-4168

FEC ID number of contributing federal political committee. **C** C00113241

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11C.44772

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. NATIONAL AUTOMOBILE DEALERS ASSOCIATION POLITICAL ACTION COM

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

Mailing Address 8484 WESTPARK DRIVE; SUITE 500

City TYSONS State VA Zip Code 22102-3588

FEC ID number of contributing federal political committee. **C** C00040998

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

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

Transaction ID : SA11C.45531

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NATIONAL BEER WHOLESALERS ASSOCIATION PAC

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

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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
09 / 27 / 2019

Transaction ID : SA11C.43121

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
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 62 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. NATIONAL BEER WHOLESALERS ASSOCIATION PAC

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

Mailing Address 1101 KING STREET
SUITE 600

City ALEXANDRIA State VA Zip Code 22314-2965

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
11 / 25 / 2019
Transaction ID : SA11C.44757

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

B. NATIONAL FEDERATION OF INDEPENDENT BUSINESS PAC

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

Mailing Address 1201 F STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20004-1221

FEC ID number of contributing federal political committee. **C** C00101105

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
11 / 29 / 2019
Transaction ID : SA11C.44821

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. NATIONAL RESTAURANT ASSOCIATION PAC

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

Mailing Address 2055 L STREET NW

City WASHINGTON State DC Zip Code 20036-4983

FEC ID number of contributing federal political committee. **C** C00003764

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
12 / 31 / 2019
Transaction ID : SA11C.45453

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
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 63 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. NATIONAL TURKEY FEDERATION PAC TURPAC

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

Mailing Address 1225 NEW YORK AVENUE NW
SUITE 400

City WASHINGTON State DC Zip Code 20005-6404

FEC ID number of contributing federal political committee. **C** C00076182

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
 10 / 24 / 2019

Transaction ID : SA11C.44348

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. NEXTERA ENERGY, INC. PAC

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

Mailing Address 700 UNIVERSE BOULEVARD

City JUNO BEACH State FL Zip Code 33408-2657

FEC ID number of contributing federal political committee. **C** C00064774

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2019

Transaction ID : SA11C.42593

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

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

Mailing Address ONE CONSTITUTION AVE NE

City WASHINGTON State DC Zip Code 20002-5618

FEC ID number of contributing federal political committee. **C** C00009282

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
 12 / 31 / 2019

Transaction ID : SA11C.45424

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12500.00
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 64 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. POLARIS INDUSTRIES INC POLITICAL PARTICIPATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2100 HIGHWAY 55

City MEDINA	State MN	Zip Code 55340-9770
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00279497

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
11	/	25	/	2019

Transaction ID : SA11C.44759

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. QUEST DIAGNOSTICS INCORPORATED POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 500 PLAZA DRIVE

City SECAUCUS	State NJ	Zip Code 07094-3619
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00329185

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
08	/	27	/	2019

Transaction ID : SA11C.42849

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. RAYTHEON COMPANY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1100 WILSON BOULEVARD
SUITE 1500

City ARLINGTON	State VA	Zip Code 22209-3900
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00097568

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
08	/	21	/	2019

Transaction ID : SA11C.42836

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
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 65 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. RENAL PHYSICIANS ASSOCIATION PAC RPA PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1700 ROCKVILLE PIKE SUITE 220

City ROCKVILLE	State MD	Zip Code 20852-1631
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00409391

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2019

Transaction ID : SA11C.45135

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. ROCHE DIAGNOSTICS CORP PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 CLOVE ROAD, SUITE 8

City LITTLE FALLS	State NJ	Zip Code 07424-2139
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00072769

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 26 / 2019

Transaction ID : SA11C.42776

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. STANLEY BLACK & DECKER INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 8TH STREET, NW
SUITE 500

City WASHINGTON	State DC	Zip Code 20001-3965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00060087

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
09 / 27 / 2019

Transaction ID : SA11C.43094

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 66 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. STANLEY BLACK & DECKER INC. PAC

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

Mailing Address 701 8TH STREET, NW
SUITE 500

City WASHINGTON State DC Zip Code 20001-3965

FEC ID number of contributing federal political committee. **C** C00060087

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

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

Transaction ID : SA11C.45449

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

B. TEVA PHARMACEUTICALS USA INC. PAC

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

Mailing Address 901 NEW YORK AVENUE, NW
5TH FLOOR EAST

City WASHINGTON State DC Zip Code 20001-4432

FEC ID number of contributing federal political committee. **C** C00434811

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
10 / 03 / 2019

Transaction ID : SA11C.43852

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. THE ALUMINUM ASSOCIATION INC. ALUMINUM PAC

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

Mailing Address 1400 CRYSTAL DRIVE
SUITE 430

City ARLINGTON State VA Zip Code 22202-4153

FEC ID number of contributing federal political committee. **C** C00570606

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 03 / 2019

Transaction ID : SA11C.43851

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 67 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. TRUCKING PAC OF THE AMERICAN TRUCKING ASSOCIATIONS INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 1ST STREET SE

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.44978

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20005-6621
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010470

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.45458

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. UNITED HEALTH SERVICES PAC, INC.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1626 JEURGENS COURT

City NORCROSS	State GA	Zip Code 30093-2219
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00400135

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
09	/	27	/	2019

Transaction ID : SA11C.43113

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	10000.00
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 68 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. UNITED PARCEL SERVICE INC. PAC - UPS PAC

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

Mailing Address 55 GLENLAKE PARKWAY

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

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
10	/	01	/	2019

Transaction ID : SA11C.43856

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. UNITED SERVICES AUTOMOBILE ASSOCIATION EMPLOYEE PAC - USAA P

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

Mailing Address 9800 FREDERICKSBURG ROAD

City SAN ANTONIO	State TX	Zip Code 78288-0001
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00164145

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
11	/	25	/	2019

Transaction ID : SA11C.44767

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. US ONCOLOGY INC. NETWORK PAC

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

Mailing Address 10101 WOODLOCH FOREST DRIVE

City THE WOODLANDS	State TX	Zip Code 77380-1975
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00339655

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID : SA11C.45451

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	9500.00
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 69 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. US RENAL CARE PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5851 LEGACY CIRCLE SUITE 900

City PLANO	State TX	Zip Code 75024-5982
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00639260

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID : SA11C.45426

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. VERIZON MEDIA/OATH INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1750 PENNSYLVANIA AVE NW
SUITE 600

City WASHINGTON	State DC	Zip Code 20006-4514
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00380535

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID : SA11C.45523

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 702 SW 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-6209
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2019

Transaction ID : SA11C.42890

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	5000.00
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 70 OF 95
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

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

Mailing Address 702 SW 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716-6209
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2019

Transaction ID : SA11C.43855

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. WELLCARE HEALTH PLANS, INC. PAC

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

Mailing Address 8735 HENDERSON ROAD

City TAMPA	State FL	Zip Code 33634-1143
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00390575

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	03	/	2019

Transaction ID : SA11C.42784

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

C.

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

Mailing Address

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	299400.00

**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 71 OF 95
<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 HOOSIER VICTORY FUND
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
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00634915

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
21826.40

Date of Receipt

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

Transaction ID : SA12.44984

Amount of Each Receipt this Period
6211.00

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

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

Mailing Address PO BOX 1070

City CORONA DEL MAR	State CA	Zip Code 92625-6070
------------------------	-------------	------------------------

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
11	/	21	/	2019

Transaction ID : SA.44731.7.1911

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

C. MUTZ, GREGORY, T., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 456 W HURON STREET

City CHICAGO	State IL	Zip Code 60654-3495
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
AMLI RESIDENTIAL CHAIRMAN & CEO

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	/	2019

Transaction ID : SA.40797.7.1911

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶	6211.00
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 72 OF 95
<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. CVS HEALTH PAC

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

Mailing Address 1275 PENNSYLVANIA AVENUE, NW
SUITE 700

City WASHINGTON State DC Zip Code 20004-2448

FEC ID number of contributing federal political committee. **C** C00384818

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 Y Y
03 / 30 / 2019

Transaction ID : SA.40541.7.1911

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

B. EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC

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

Mailing Address 400 PROFESSIONAL DRIVE
SUITE 400

City GAITHERSBURG State MD Zip Code 20879-3457

FEC ID number of contributing federal political committee. **C** C00380303

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2019

Transaction ID : SA.40542.7.1911

Amount of Each Receipt this Period
1000.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG HOOSIER VICTORY FUND

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	6211.00

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 73 OF 95
<input type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14
<input type="checkbox"/> 11c <input type="checkbox"/> 15	<input checked="" type="checkbox"/> 12 <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
REPUBLICAN PARTY OF WISCONSIN

Mailing Address 148 E. JOHNSON ST.

City MADISON	State WI	Zip Code 53703
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00074450

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

Receipt For: 018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 01 / 2019

Transaction ID : SA16.8922

Amount of Each Receipt this Period
3000.00

Memo Item
REFUND: POLITICAL CONTRIBUTION

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

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

A. CONNELL, JAMES, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1644 WHITE PINES CT.

City NAPERVILLE State IL Zip Code 60563

Purpose of Disbursement EXPENSE REIMBURSEMENT - SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9196

Amount of Each Disbursement this Period: 4345.00

Memo Item

B. MEDINAH COUNTRY CLUB

Full Name (Last, First, Middle Initial)

Mailing Address 6N001 MEDINAH RD

City MEDINAH State IL Zip Code 60157

Purpose of Disbursement GOLF FEES/FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 12 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9196

Amount of Each Disbursement this Period: 4345.00

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I8913

Amount of Each Disbursement this Period: 60.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4405.30

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 03 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.I8914**

Amount of Each Disbursement this Period: 120.60

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 18 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.I8923**

Amount of Each Disbursement this Period: 60.30

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
08 / 09 / 2019

FEC Identification Number: C

Transaction ID : **SB21B.I8932**

Amount of Each Disbursement this Period: 40.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 221.20

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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I8939
Amount of Each Disbursement this Period
60.30

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I8951
Amount of Each Disbursement this Period
100.30

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 18 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I8960
Amount of Each Disbursement this Period
20.30

Memo Item

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

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

180.90

**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. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 02 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9103

Amount of Each Disbursement this Period: 40.30

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 19 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9298

Amount of Each Disbursement this Period: 120.60

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 21 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9300

Amount of Each Disbursement this Period: 80.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 241.20

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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

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.I9305
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

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.I9310
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. ANEDOT

Mailing Address 4017 BUENA VISTA ST UNIT 109

City DALLAS State TX Zip Code 75204

Purpose of Disbursement
CREDIT CARD MERCHANT FEE

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.I9318
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)
OORAH! POLITICAL ACTION COMMITTEE

A. BINNY'S BEVERAGE DEPOT

Full Name (Last, First, Middle Initial)

Mailing Address 790 ROYAL SAINT GEORGE DRIVE

City NAPERVILLE State IL Zip Code 60563-8955

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
11 / 15 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9293

Amount of Each Disbursement this Period: 201.48

Memo Item

B. BROGHAMER CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 502 MONROE ST

City NEWPORT State KY Zip Code 41071-2006

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 01 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I8870

Amount of Each Disbursement this Period: 3013.40

Memo Item

C. BROGHAMER CONSULTING LLC

Full Name (Last, First, Middle Initial)

Mailing Address 502 MONROE ST

City NEWPORT State KY Zip Code 41071-2006

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
09 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I8944

Amount of Each Disbursement this Period: 3001.34

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6216.22

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. BROGHAMER CONSULTING LLC		Date of Disbursement MM / DD / YYYY 10 / 04 / 2019
Mailing Address 502 MONROE ST		FEC Identification Number C [] Transaction ID : SB21B.I9108 Amount of Each Disbursement this Period [] 1508.84
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		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. BROGHAMER CONSULTING LLC		Date of Disbursement MM / DD / YYYY 11 / 12 / 2019
Mailing Address 502 MONROE ST		FEC Identification Number C [] Transaction ID : SB21B.I9197 Amount of Each Disbursement this Period [] 1526.23
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		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. BROGHAMER CONSULTING LLC		Date of Disbursement MM / DD / YYYY 12 / 09 / 2019
Mailing Address 502 MONROE ST		FEC Identification Number C [] Transaction ID : SB21B.I9315 Amount of Each Disbursement this Period [] 1500.00
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		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).....▶	[] 4535.07
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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CHARLIE PALMER STEAK

Mailing Address 101 CONSTITUTION AVENUE NW

City
WASHINGTON

State
DC

Zip Code
20001-2133

Purpose of Disbursement
FOOD/BEVERAGE

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.I8924

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE

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.I8915

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE

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.I8934

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)

OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9171

Amount of Each Disbursement this Period

[REDACTED] 125.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			16			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9177

Amount of Each Disbursement this Period

[REDACTED] 125.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City
TYSONS CORNER

State
VA

Zip Code
22182

Purpose of Disbursement
SOFTWARE

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:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			07			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9198

Amount of Each Disbursement this Period

[REDACTED] 125.00

Memo Item

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

[REDACTED] 375.00

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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL ROAD, SUITE 400

City TYSONS CORNER State VA Zip Code 22182

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
12 / 09 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I9319
Amount of Each Disbursement this Period
125.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DELUXE CORPORATION

Mailing Address 3680 VICTORIA STREET N

City SHOREVIEW State MN Zip Code 55126-2906

Purpose of Disbursement PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
07 / 01 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I8912
Amount of Each Disbursement this Period
237.27

Memo Item

Full Name (Last, First, Middle Initial)

C. EC CONSULTING, LLC

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement
MM / DD / YYYY
09 / 19 / 2019

FEC Identification Number

C
Transaction ID : SB21B.I8958
Amount of Each Disbursement this Period
22399.39

Memo Item

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

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

22761.66

**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. EC CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 12 / 09 / 2019	
Mailing Address PO BOX 40323		FEC Identification Number C [] Transaction ID : SB21B.I9316 Amount of Each Disbursement this Period [] 57165.67	
City WASHINGTON	State DC	Zip Code 20016-2705	Category/ Type []
Purpose of Disbursement FINANCE CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. LIMESTONE STRATEGIES		Date of Disbursement MM / DD / YYYY 07 / 01 / 2019	
Mailing Address 5750 CASTLE CREEK PKWY N DR SUITE 367		FEC Identification Number C [] Transaction ID : SB21B.I8871 Amount of Each Disbursement this Period [] 5000.00	
City INDIANAPOLIS	State IN	Zip Code 46250	Category/ Type []
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C. LIMESTONE STRATEGIES		Date of Disbursement MM / DD / YYYY 09 / 06 / 2019	
Mailing Address 5750 CASTLE CREEK PKWY N DR SUITE 367		FEC Identification Number C [] Transaction ID : SB21B.I8943 Amount of Each Disbursement this Period [] 5000.00	
City INDIANAPOLIS	State IN	Zip Code 46250	Category/ Type []
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 67165.67
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

A. LIMESTONE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 5750 CASTLE CREEK PKWY N DR
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) ▼

Date of Disbursement: 10 / 04 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9109

Amount of Each Disbursement this Period: 5000.00

Memo Item

B. LIMESTONE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 5750 CASTLE CREEK PKWY N DR
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) ▼

Date of Disbursement: 10 / 23 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9181

Amount of Each Disbursement this Period: 5000.00

Memo Item

C. LIMESTONE STRATEGIES

Full Name (Last, First, Middle Initial)

Mailing Address 5750 CASTLE CREEK PKWY N DR
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) ▼

Date of Disbursement: 12 / 09 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9317

Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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. 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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			15			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9208

Amount of Each Disbursement this Period

[REDACTED] 1150.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLAS

State
TX

Zip Code
75235-1908

Purpose of Disbursement
TRAVEL

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
10			07			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9172

Amount of Each Disbursement this Period

[REDACTED] 232.96

Memo Item

Full Name (Last, First, Middle Initial)

C. THE MONOCLE

Mailing Address 107 D ST NE

City
WASHINGTON

State
DC

Zip Code
20002-5657

Purpose of Disbursement
FOOD/BEVERAGE

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
11			21			2019			

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I9301

Amount of Each Disbursement this Period

[REDACTED] 28.10

Memo Item

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

[REDACTED] 1411.06

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)
OORAH! POLITICAL ACTION COMMITTEE

A. THE MONOCLE

Full Name (Last, First, Middle Initial)

Mailing Address 107 D ST NE

City WASHINGTON State DC Zip Code 20002-5657

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
12 / 18 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I9339

Amount of Each Disbursement this Period: 2309.34

Memo Item

B. UNITED AIRLINES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 28 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I8938

Amount of Each Disbursement this Period: 638.60

Memo Item

C. UNITED AIRLINES, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 8909 PURDUE ROAD, SUITE 400

City INDIANAPOLIS State IN Zip Code 46268-3149

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
09 / 09 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I8949

Amount of Each Disbursement this Period: 25.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2972.94

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. UNITED AIRLINES, INC.

Mailing Address 8909 PURDUE ROAD, SUITE 400

City
INDIANAPOLIS

State
IN

Zip Code
46268-3149

Purpose of Disbursement
TRAVEL

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	9			0	9			2	0	1	9		

FEC Identification Number

C
Transaction ID : SB21B.I8950
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. WASHINGTON TAX AND PUBLIC POLICY

Mailing Address 300 NEW JERSEY AVENUE NW SUITE 601

City
WASHINGTON

State
DC

Zip Code
20001

Purpose of Disbursement
FACILITY RENTAL

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	7			0	1			2	0	1	9		

FEC Identification Number

C
Transaction ID : SB21B.I8872
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. BGR PAC

Mailing Address 601 13TH STREET NW
FLOOR 11

City
WASHINGTON

State
DC

Zip Code
20005-3822

Purpose of Disbursement
IN-KIND CONTRIBUTION

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
1	2			0	1			2	0	1	9		

FEC Identification Number

C
Transaction ID : SB21B.44931
Amount of Each Disbursement this Period

FACILITY RENTAL/CATERING

Memo Item

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

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

<input type="text" value="1998.30"/>
<input type="text" value=""/>

**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. ELECT REPUBLICAN WOMEN PAC

Full Name (Last, First, Middle Initial)

Mailing Address 5766 BROADWAY TERRACE

City INDIANAPOLIS State IN Zip Code 46220

Purpose of Disbursement
REGISTRATION FEE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2019

FEC Identification Number

C

Transaction ID : SB21B.I9179
Amount of Each Disbursement this Period

1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

1000.00

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

129078.72

**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. BEN SASSE FOR US SENATE INC		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address 332 W LEE HWY # 303		FEC Identification Number C00547976 Transaction ID : SB23.I8978
City WARRENTON	State VA	Zip Code 20186
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name SASSE, BENJAMIN, E, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District:	

Full Name (Last, First, Middle Initial) B. BILL CASSIDY FOR US SENATE		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 80505		FEC Identification Number C00543983 Transaction ID : SB23.I8986
City BATON ROUGE	State LA	Zip Code 70898
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name CASSIDY, WILLIAM, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: LA	District:	

Full Name (Last, First, Middle Initial) C. CAPITO FOR WEST VIRGINIA		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address P.O. BOX 11519		FEC Identification Number C00539825 Transaction ID : SB23.I8979
City CHARLESTON	State WV	Zip Code 25339
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name CAPITO, SHELLEY, MOORE, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WV	District:	

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. CINDY HYDE-SMITH FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

Mailing Address PO BOX 2930

FEC Identification Number

C C00675348

Transaction ID : SB23.I8976

Amount of Each Disbursement this Period

5000.00

Memo Item

City JACKSON State MS Zip Code 39207

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
HYDE-SMITH, CINDY, , ,

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

State: MS District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2019

Mailing Address PO BOX 13300

FEC Identification Number

C C00207993

Transaction ID : SB23.I8983

Amount of Each Disbursement this Period

5000.00

Memo Item

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement
POLITICAL CONTRIBUTION

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

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

State: OK District:

Full Name (Last, First, Middle Initial)
C. GEORGIANS FOR KELLY LOEFFLER

Date of Disbursement

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

Mailing Address PO BOX 11623

FEC Identification Number

C C00729608

Transaction ID : SB23.I9330

Amount of Each Disbursement this Period

5000.00

Memo Item

City ATLANTA State GA Zip Code 30355

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
LOEFFLER, KELLY, , ,

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

State: GA District:

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

15000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 92 OF 95

<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. JIM RISCH FOR U S SENATE COMMITTEE

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2019

Mailing Address 407 W JEFFERSON

City BOISE State ID Zip Code 83702

FEC Identification Number

C00440362

Transaction ID : SB23.I8981

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

RISCH, JAMES, E, ,

Category/Type

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: ID District:

Full Name (Last, First, Middle Initial)

B. JOHN JAMES FOR SENATE INC

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2019

Mailing Address PO BOX 2969

City FARMINGTON HILLS State MI Zip Code 48333

FEC Identification Number

C00651208

Transaction ID : SB23.I8977

Amount of Each Disbursement this Period

5000.00

Memo Item

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

JAMES, JOHN, , ,

Category/Type

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: MI District:

Full Name (Last, First, Middle Initial)

C. MCCONNELL SENATE COMMITTEE

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 25 / 2019

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

FEC Identification Number

C00193342

Transaction ID : SB23.I8975

Amount of Each Disbursement this Period

916.46

Memo Item

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

MCCONNELL, MITCH, , ,

Category/Type

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: KY District:

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

10916.46

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. ROUNDS FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 250		FEC Identification Number C 000532465 Transaction ID : SB23.I8982 Amount of Each Disbursement this Period 3000.00
City PIERRE	State SD	Zip Code 57501-0250
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name ROUNDS, MIKE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District:	

Full Name (Last, First, Middle Initial) B. ROUNDS FOR SENATE		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 250		FEC Identification Number C 000532465 Transaction ID : SB23.I8987 Amount of Each Disbursement this Period 5000.00
City PIERRE	State SD	Zip Code 57501-0250
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name ROUNDS, MIKE, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: SD	District:	

Full Name (Last, First, Middle Initial) C. NRSC TARGETED STATE VICTORY		Date of Disbursement MM / DD / YYYY 11 / 18 / 2019
Mailing Address PO BOX 60148		FEC Identification Number C 000724344 Transaction ID : SB23.I9213 Amount of Each Disbursement this Period 50000.00
City WASHINGTON	State DC	Zip Code 20039
Purpose of Disbursement POLITICAL CONTRIBUTION		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:	

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

58000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

A. INDIANA REPUBLICAN STATE COMMITTEE, INC.

Full Name (Last, First, Middle Initial)

Mailing Address 101 WEST OHIO STREET SUITE 2200

City INDIANAPOLIS State IN Zip Code 46204-4207

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 09 / 27 / 2019

FEC Identification Number: C C00006486
Transaction ID : SB23.18989

Amount of Each Disbursement this Period: 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

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: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	103916.46

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" 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. MARK SEABROOK FOR MAYOR		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address PO BOX 3		FEC Identification Number C [] Transaction ID : SB29.I8984 Amount of Each Disbursement this Period [] 1000.00
City NEW ALBANY	State IN	Zip Code 47151
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TIM SMITH FOR MAYOR		Date of Disbursement MM / DD / YYYY 10 / 23 / 2019
Mailing Address 6010 CHERRY HILL PARKWAY		FEC Identification Number C [] Transaction ID : SB29.I9180 Amount of Each Disbursement this Period [] 2500.00
City FT. WAYNE	State IN	Zip Code 46835
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT DAVE MILLER		Date of Disbursement MM / DD / YYYY 09 / 25 / 2019
Mailing Address 3743 EAST JACKSON BOULEVARD		FEC Identification Number C [] Transaction ID : SB29.I8985 Amount of Each Disbursement this Period [] 1000.00
City ELKHART	State IN	Zip Code 46516
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 4500.00
TOTAL This Period (last page this line number only).....▶	[] 4500.00