

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period 08 / 01 / 2020 through 08 / 31 / 2020

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 09 / 14 / 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

OORAH! POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="215570.40"/>	<input type="text" value="215570.40"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="176629.37"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="26000.00"/>	<input type="text" value="164964.74"/>
(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="202629.37"/>	<input type="text" value="380535.14"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26600.30"/>	<input type="text" value="204506.07"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="176029.07"/>	<input type="text" value="176029.07"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OORAH! POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
08 / 01 / 2020 To: M M / D D / Y Y Y Y Y Y
08 / 31 / 2020

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	17500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	17500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	26000.00	120000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26000.00	137500.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	27288.74
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	176.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	26000.00	164964.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	26000.00	164964.74

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	6600.30	114506.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6600.30	114506.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	90000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26600.30	204506.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26600.30	204506.07

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)	26000.00	137500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26000.00	137500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6600.30	114506.07
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	176.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6600.30	114330.07

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

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

Mailing Address 1111 14TH STREET NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
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FEC ID number of contributing federal political committee. **C** C00000729

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	/	05	/	2020

Transaction ID : SA11C.57712

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address 701 PENNSYLVANIA AVE NW STE 750

City WASHINGTON	State DC	Zip Code 20004-2661
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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 ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2020

Transaction ID : SA11C.58742

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address 550 S. TRYON STREET DEC37D

City CHARLOTTE	State NC	Zip Code 28202-4200
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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

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	21	/	2020

Transaction ID : SA11C.58740

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 7 OF 11
<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. 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 08 / 26 / 2020
Transaction ID : SA11C.59318
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

B. MERCK & CO., INC., EMPLOYEES PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 601 PENNSYLVANIA AVENUE NW
 SUITE 1200
 City WASHINGTON State DC Zip Code 20004-2601
 FEC ID number of contributing federal political committee. **C** C00097485
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 21 / 2020
Transaction ID : SA11C.58739
 Amount of Each Receipt this Period 3500.00
 Memo Item
CONTRIBUTION

C. 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 ▼ 5000.00

Date of Receipt 08 / 02 / 2020
Transaction ID : SA11C.57584
 Amount of Each Receipt this Period 5000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	13500.00
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 11
<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. TOYOTA MOTOR NORTH AMERICA INC PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 7TH STREET, NW, SUITE 1000

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 05 / 2020

Transaction ID : SA11C.57783

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

B. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT WALPAC
 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
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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 ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 21 / 2020

Transaction ID : SA11C.58741

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
------	-------	----------

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).....	26000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. 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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 07 / 2020

FEC Identification Number

C
Transaction ID : SB21B.I9924
Amount of Each Disbursement this Period
100.30

Memo Item

Full Name (Last, First, Middle Initial)

B. BROGHAMER CONSULTING LLC

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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2020

FEC Identification Number

C
Transaction ID : SB21B.I9937
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LIMESTONE STRATEGIES

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
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2020

FEC Identification Number

C
Transaction ID : SB21B.I9938
Amount of Each Disbursement this Period
5000.00

Memo Item

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

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

6600.30
6600.30

**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. KANSANS FOR MARSHALL

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1588

City GREAT BEND State KS Zip Code 67530

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name MARSHALL, ROGER, W, ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: KS District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C00576173
Transaction ID : SB23.I9940
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. MARK RONCHETTI FOR NEW MEXICO

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 92050

City ALBUQUERQUE State NM Zip Code 87199

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name RONCHETTI, MARK, V., ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NM District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C00733469
Transaction ID : SB23.I9939
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. TEAM HAGERTY

Full Name (Last, First, Middle Initial)
Mailing Address 4515 HARDING PIKE SUITE 110

City NASHVILLE State TN Zip Code 37205

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name HAGERTY, BILL, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: TN District:

Date of Disbursement: 08 / 19 / 2020

FEC Identification Number: C00718627
Transaction ID : SB23.I9942
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. TUBERVILLE FOR SENATE, INC.

Date of Disbursement
MM / DD / YYYY
08 / 19 / 2020

Mailing Address PO BOX 3071

City AUBURN State AL Zip Code 36831

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name TUBERVILLE, THOMAS, H, ,

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

State: AL District:

FEC Identification Number
C C00701672
Transaction ID : SB23.I9941
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B.

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)
C.

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

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).....▶	20000.00