

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 POLICE OFFICERS DEFENSE ALLIANCE LLC

ADDRESS (number and street) 8228 Fawn Meadow Ave LAS VEGAS NV 89149

2. FEC IDENTIFICATION NUMBER C00667865 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 24 / 2020 through 12 / 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. POLLOCK, KECIA, MARIE, Type or Print Name of Treasurer

Signature of Treasurer POLLOCK, KECIA, MARIE, [Electronically Filed] Date 01 / 29 / 2021

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)

Write or Type Committee Name

POLICE OFFICERS DEFENSE ALLIANCE LLC

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="220908.43"/>	<input type="text" value="220908.43"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="106508.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="157418.00"/>	<input type="text" value="2923507.20"/>
(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="263926.92"/>	<input type="text" value="3144415.63"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="192250.90"/>	<input type="text" value="3072739.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="71676.02"/>	<input type="text" value="71676.02"/>
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

POLICE OFFICERS DEFENSE ALLIANCE LLC

Report Covering the Period: From: 11 / 24 / 2020 To: 12 / 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).....	2035.00	27625.00
(ii) Unitemized	155383.00	2888826.20
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	157418.00	2916451.20
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	157418.00	2916451.20
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	7056.00
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)).....▶	157418.00	2923507.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	157418.00	2923507.20

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	190385.90	2789507.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	190385.90	2789507.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	9838.73
24. Independent Expenditures (use Schedule E)	0.00	260000.00
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	1865.00	13393.13
(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)).....	1865.00	13393.13
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)) ..	192250.90	3072739.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	192250.90	3072739.61

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)	157418.00	2916451.20
34. Total Contribution Refunds (from Line 28(d))	1865.00	13393.13
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	155553.00	2903058.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	190385.90	2789507.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	7056.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	190385.90	2782451.75

: 97 `A-G79 @C B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`-H9A-N5H-CB

Form/Schedule: F3XN
Transaction ID :

BEST EFFORTS PRACTICES - C006678651. Initial solicitation for a contribution is made via phone call and solicitor additionally states during the solicitation call that as a part of compliance, the PAC is required to inform the contributor that "Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year". Following acceptance to provide a contribution, a follow-up invoice letter is mailed to the contributor which includes a clear and conspicuous request for contributor's employer and occupation information to be written in and returned when they mail back their contribution. 2. Secondly, if employer/occupation information was still not provided within the above steps, a follow up letter is sent via US mail along with a separate pre-addressed return envelope sent to the contributor, again clearly requesting the name of employer and occupation, without solicitation of a contribution to send back. 3. Lastly, the third/final step if employer/occupation information was still not provided, a follow up phone call is placed to the contributor within 30 days of receipt of the contribution during which the missing information is clearly requested (without solicitation of a contribution) as an FEC compliance requirement. If all of these steps have been exhausted and the employer and occupation information still has not been obtained from the donor, 'best efforts' will be entered into these fields to communicate to the FEC that all above steps were taken. If we are able to obtain missing employer/occupation information, we will amend our report to include the updated information.

Form/Schedule:
Transaction ID:

**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 26
	<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	

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. ARTZIN, LYNTON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2800 N CENTRAL AVE
 STE 7125
 City PHOENIX State AZ Zip Code 85004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Best Efforts Occupation (for Individual) Best Efforts
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2020
Transaction ID : SA11AI-22269606
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. AVERILL, LUCY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 202 WEXFORD CT
 City CANTON State GA Zip Code 30115
 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 ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2020
Transaction ID : SA11AI-22270291
 Amount of Each Receipt this Period
 105.00
 Memo Item

C. DEACON, RUTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5800 FOREST HILLS BLVD
 APT D304
 City COLUMBUS State OH Zip Code 43231
 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 ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 04 / 2020
Transaction ID : SA11AI-22272691
 Amount of Each Receipt this Period
 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
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:	PAGE 8 OF 26
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. ENGLER, MICHAEL, , ,

Mailing Address 8925 ARONA AVE

City CIRCLE PINES	State MN	Zip Code 55014
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Best Efforts	Occupation (for Individual) Best Efforts
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2020

Transaction ID : SA11AI-22270249

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 56 CHANDLER RD

City FARMINGTON	State ME	Zip Code 04938
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2020

Transaction ID : SA11AI-22270959

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address 520 E PRAIRIE ST
APT 2

City MARENGO	State IL	Zip Code 60152
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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	/	21	/	2020

Transaction ID : SA11AI-22268616

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	465.00
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 26
<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. HERRMANN II, WILLIAM G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 W RANDOL MILL RD
 APT D220
 City ARLINGTON State TX Zip Code 76012
 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 ▼ 245.00

Date of Receipt 12 / 12 / 2020
Transaction ID : SA11AI-22270995
 Amount of Each Receipt this Period 30.00
 Memo Item

B. HOLDEN, RAYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 LAKE VILLAGE DR
 City ANN ARBOR State MI Zip Code 48103
 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 ▼ 600.00

Date of Receipt 12 / 21 / 2020
Transaction ID : SA11AI-22268715
 Amount of Each Receipt this Period 100.00
 Memo Item

C. JORDAN, SARAH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 145 WINDEMERE PT
 City MOUNT GILEAD State NC Zip Code 27306
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 03 / 2020
Transaction ID : SA11AI-22272851
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	230.00
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: PAGE 10 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. LOCKLIN, MICHAEL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 VETERANS DR RM 209
 City RADCLIFF State KY Zip Code 40160
 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 ▼ 215.00

Date of Receipt 12 / 04 / 2020
Transaction ID : SA11AI-22272698
 Amount of Each Receipt this Period 75.00
 Memo Item

B. MARVIN, ROBERT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 914 LAKE ST NE
 City WARROAD State MN Zip Code 56763
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 14 / 2020
Transaction ID : SA11AI-22270883
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SHOESMITH, REGINA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2201 GOLDENROD LN
 City SAN RAMON State CA Zip Code 94582
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Deacons in The Episcopal Church Occupation (for Individual) Deacon
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 30 / 2020
Transaction ID : SA11AI-22269957
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 26
	<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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. SLAGH, VERN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10578 SOUTHFIELD DR

City ZEELAND	State MI	Zip Code 49464
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Conan, Inc.	Occupation (for Individual) Vice President
--	---

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		22		2020

Transaction ID : SA11AI-22270381

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 1471 LOCUST DR

City TRACY	State CA	Zip Code 95376
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2020

Transaction ID : SA11AI-22271306

Amount of Each Receipt this Period
115.00

Memo Item

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

Mailing Address 1063 HILLSBORO MILE
UNIT 301

City HILLSBORO BEACH	State FL	Zip Code 33062
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2020

Transaction ID : SA11AI-22272715

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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: PAGE 12 OF 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TAYLOR, DAMIAN, , ,

Mailing Address 3401 EDENBORN AVE
APT 315

City METAIRIE State LA Zip Code 70002

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

Name of Employer (for Individual) Taylormade Construction, LLC Occupation (for Individual) Director/ Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2020

Transaction ID : SA11AI-22272738

Amount of Each Receipt this Period
100.00

Memo Item

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	100.00
TOTAL This Period (last page this line number only).....▶	2035.00

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 2377.50

Memo Item

B. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 17 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 2729.25

Memo Item

C. Pollock, Kecia M., , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4712 El Presidente Dr

City Las Vegas State NV Zip Code 89129

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 3417.75

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8524.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 27423.68

Memo Item

B. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 5393.12

Memo Item

C. American Technology Services

Full Name (Last, First, Middle Initial)

Mailing Address 125 North 2nd Street
Box 241

City Phoenix State AZ Zip Code 85004

Purpose of Disbursement Software Licensing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 17 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39704

Amount of Each Disbursement this Period: 20552.64

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 53369.44

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. American Technology Services			Date of Disbursement MM / DD / YYYY 12 / 18 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [] Transaction ID : SB21B-39704	
City Phoenix	State AZ	Zip Code 85004	Amount of Each Disbursement this Period [] 4922.88	
Purpose of Disbursement Software Licensing		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) B. American Technology Services			Date of Disbursement MM / DD / YYYY 12 / 24 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [] Transaction ID : SB21B-39705	
City Phoenix	State AZ	Zip Code 85004	Amount of Each Disbursement this Period [] 7386.56	
Purpose of Disbursement Software Licensing		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

Full Name (Last, First, Middle Initial) C. American Technology Services			Date of Disbursement MM / DD / YYYY 12 / 31 / 2020	
Mailing Address 125 North 2nd Street Box 241			FEC Identification Number C [] Transaction ID : SB21B-3970!	
City Phoenix	State AZ	Zip Code 85004	Amount of Each Disbursement this Period [] 5076.96	
Purpose of Disbursement Software Licensing		Candidate Name	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	[] 17386.40
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Authorize.net		Date of Disbursement MM / DD / YYYY 11 / 30 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Combined off the top CC Transaction fees Nov		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : SB21B-39705
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) ▼		Amount of Each Disbursement this Period <input type="text" value="109.45"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Authorize.net		Date of Disbursement MM / DD / YYYY 12 / 02 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Credit Card Processing		<input type="text" value=""/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : SB21B-39705
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) ▼		Amount of Each Disbursement this Period <input type="text" value="149.96"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Authorize.net		Date of Disbursement MM / DD / YYYY 12 / 31 / 2020	
Mailing Address 808 E Utah Valley Dr			
City American Fork	State UT	Zip Code 84003	
Purpose of Disbursement Combined off the top CC Transaction fees Dec		<input type="text" value="001"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : SB21B-39705
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) ▼		Amount of Each Disbursement this Period <input type="text" value="2109.39"/>
State: District:			<input type="checkbox"/> 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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. C Terry Raben LTD

Full Name (Last, First, Middle Initial)

Mailing Address 3140 S. Rainbow Blvd Suite# 403

City Las Vegas State NV Zip Code 89146

Purpose of Disbursement Accounting Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 02 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39705

Amount of Each Disbursement this Period: 500.00

Memo Item

B. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 27 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39705

Amount of Each Disbursement this Period: 13052.35

Memo Item

C. Compliance Consultants

Full Name (Last, First, Middle Initial)

Mailing Address 270 Cobb Pky S

City Marietta State GA Zip Code 30060

Purpose of Disbursement Credit Card Pmt Processing and

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB21B-3970!

Amount of Each Disbursement this Period: 7654.86

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 21207.21

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Compliance Consultants		Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 31 / 2020	
Mailing Address 270 Cobb Pky S		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 7205.88	
City Marietta	State GA	Zip Code 30060	Category/ Type []
Purpose of Disbursement Credit Card Pmt Processing and		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. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 17 / 2020	
Mailing Address PO BOX 53262		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 173.92	
City Phoenix	State AZ	Zip Code 85072	Category/ Type []
Purpose of Disbursement Telephone, Telecommunications		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. Cox Communications		Date of Disbursement M M / D D / Y Y Y Y Y Y 12 / 17 / 2020	
Mailing Address PO BOX 53262		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 6.48	
City Phoenix	State AZ	Zip Code 85072	Category/ Type []
Purpose of Disbursement Telephone, Telecommunications		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)..... ▶		[] 7386.28	
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Cox Communications		Date of Disbursement MM / DD / YYYY 12 / 17 / 2020	
Mailing Address PO BOX 53262		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 6.48	
City Phoenix	State AZ	Zip Code 85072	Category/ Type []
Purpose of Disbursement Telephone, Telecommunications		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement MM / DD / YYYY 12 / 16 / 2020	
Mailing Address 6750 N Durango Dr.		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 141.97	
City Las Vegas	State NV	Zip Code 89149	Category/ Type []
Purpose of Disbursement Office Supplies		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

Full Name (Last, First, Middle Initial) C. PACSmart Filing Services LLC		Date of Disbursement MM / DD / YYYY 11 / 24 / 2020	
Mailing Address 1013 Centre Road, Suite 403-A		FEC Identification Number C [] Transaction ID : SB21B-39706 Amount of Each Disbursement this Period [] 200.00	
City Wilmington	State DE	Zip Code 19805	Category/ Type []
Purpose of Disbursement Accounting Fees		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) ▼		<input type="checkbox"/> Memo Item
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 348.45
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. PACSmart Filing Services LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1013 Centre Road, Suite 403-A

City Wilmington State DE Zip Code 19805

Purpose of Disbursement Accounting Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 23 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 1500.00

Memo Item

B. PayPal

Full Name (Last, First, Middle Initial)

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Combined 'off the top' CC Transaction fees Nov

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 30 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 9.96

Memo Item

C. PayPal

Full Name (Last, First, Middle Initial)

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement Combined 'off the top' CC Transaction fees Dec

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 54.28

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 1564.24

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial) A. Unified Data Services		Date of Disbursement M M / D D / Y Y Y Y Y 11 / 27 / 2020	
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [] Transaction ID : SB21B-39707 Amount of Each Disbursement this Period [] 4446.00	
City Salt Lake City	State UT	Zip Code 84106	Category/ Type []
Purpose of Disbursement Caging and Escrow		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) ▼		<input type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) B. Unified Data Services		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 03 / 2020	
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [] Transaction ID : SB21B-39707 Amount of Each Disbursement this Period [] 2609.10	
City Salt Lake City	State UT	Zip Code 84106	Category/ Type []
Purpose of Disbursement Caging and Escrow		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) ▼		<input type="checkbox"/> Memo Item
State: District:			
Full Name (Last, First, Middle Initial) C. Unified Data Services		Date of Disbursement M M / D D / Y Y Y Y Y 12 / 17 / 2020	
Mailing Address 2223 S Highland Dr #E6-240		FEC Identification Number C [] Transaction ID : SB21B-39707 Amount of Each Disbursement this Period [] 9941.10	
City Salt Lake City	State UT	Zip Code 84106	Category/ Type []
Purpose of Disbursement Caging and Escrow		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) ▼		<input type="checkbox"/> Memo Item
State: District:			
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 16996.20	
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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 18 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 2379.00

Memo Item

B. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 3572.40

Memo Item

C. Unified Data Services

Full Name (Last, First, Middle Initial)

Mailing Address 2223 S Highland Dr #E6-240

City Salt Lake City State UT Zip Code 84106

Purpose of Disbursement Caging and Escrow

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 31 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39707

Amount of Each Disbursement this Period: 2453.10

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8404.50

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. United States Department of the Treasury

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	0

Mailing Address 1500 Pennsylvania Ave., N.W.

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-39707
Amount of Each Disbursement this Period

[REDACTED] 1038.50

Memo Item

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

[REDACTED]

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

B. United States Department of the Treasury

Date of Disbursement

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

Mailing Address 1500 Pennsylvania Ave., N.W.

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-39708
Amount of Each Disbursement this Period

[REDACTED] 852.00

Memo Item

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

[REDACTED]

Candidate Name

Category/Type

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

Full Name (Last, First, Middle Initial)

C. United States Department of the Treasury

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	2		2	0	2	0

Mailing Address 1500 Pennsylvania Ave., N.W.

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B-39708
Amount of Each Disbursement this Period

[REDACTED] 1038.50

Memo Item

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

[REDACTED]

Candidate Name

Category/Type

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

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

[REDACTED] 2929.00

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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

Full Name (Last, First, Middle Initial)

A. United States Department of the Treasury

Mailing Address 1500 Pennsylvania Ave., N.W.

City Washington State DC Zip Code 20220

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 31 / 2020

FEC Identification Number

C
Transaction ID : SB21B-39708
Amount of Each Disbursement this Period
1426.50

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2020

FEC Identification Number

C
Transaction ID : SB21B-39708
Amount of Each Disbursement this Period
1497.17

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo Bank

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 11 / 2020

FEC Identification Number

C
Transaction ID : SB21B-39708
Amount of Each Disbursement this Period
294.01

Memo Item

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

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

3217.68

**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)
POLICE OFFICERS DEFENSE ALLIANCE LLC

A. Wells Fargo Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 6995

City Portland State OR Zip Code 97228

Purpose of Disbursement Merchant Service Bankcard Fees

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 15 / 2020

FEC Identification Number: C

Transaction ID : SB21B-39708

Amount of Each Disbursement this Period: 35.02

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).....▶	35.02
TOTAL This Period (last page this line number only).....▶	190380.65