

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

DEFENDERS OF FREEDOM AND SECURITY

ADDRESS (number and street) 8139 SUNSET AVE #130

Check if different than previously reported. (ACC) FAIR OAKS CA 95628

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00536664 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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M / D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---------------------------------------------------|---------------------------------------|----------------------------------------|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---------------------------------------------------|---------------------------------------|----------------------------------------|

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 10 / 18 / 2018 through M M / D D / Y Y Y Y Y Y 11 / 26 / 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hornaday, Alexander, , ,

Type or Print Name of Treasurer _____

Signature of Treasurer Hornaday, Alexander, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y 03 / 06 / 2019

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									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DEFENDERS OF FREEDOM AND SECURITY

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		13491.36
(b) Cash on Hand at Beginning of Reporting Period.....	26167.21	
(c) Total Receipts (from Line 19)	19799.00	118617.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	45966.21	132108.72
7. Total Disbursements (from Line 31).....	22174.03	108316.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	23792.18	23792.18
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

DEFENDERS OF FREEDOM AND SECURITY

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).....	2320.00	24253.00
(ii) Unitemized	17479.00	94364.36
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	19799.00	118617.36
(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)	19799.00	118617.36
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	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	19799.00	118617.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	19799.00	118617.36

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1209.03	22915.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1209.03	22915.54
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1750.00	8000.00
24. Independent Expenditures (use Schedule E)	19215.00	77401.00
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)) ..	22174.03	108316.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22174.03	108316.54

DETAILED SUMMARY PAGE
of Disbursements

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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)	19799.00	118617.36
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19799.00	118617.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1209.03	22915.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1209.03	22915.54

**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 16
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Baird, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4281 Express Ln #L3147
 City Sarasota State FL Zip Code 34249
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Admissions Registrar Occupation (for Individual) Ritz Colleges
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2018
Transaction ID : SA11AI.5167
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Donation

B. Centenari, Paul, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8140 Telegraph Rd
 City Severn State MD Zip Code 21144
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) business Occupation (for Individual) atlas
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11AI.5021
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Donation

C. Haffey, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10933 Meade Ct
 City Westminster State CO Zip Code 80031
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Lipidologist Occupation (for Individual) Aurora Denver Cardiology
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2018
Transaction ID : SA11AI.5489
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 16
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Larsen, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 521 Shepherd Ave
 City Winter Park State FL Zip Code 32789
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired attorney Occupation (for Individual) Retired attorney
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11AI.5112
 Amount of Each Receipt this Period 100.00
 Memo Item
 Donation

B. Litton, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1433 Cedar Post Ln #5
 City Houston State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Secondary School Counselor Occupation (for Individual) Spring Branch ISD
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 515.00

Date of Receipt 10 / 27 / 2018
Transaction ID : SA11AI.5428
 Amount of Each Receipt this Period 515.00
 Memo Item
 Donation

C. Litton, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1433 Cedar Post Ln #5
 City Houston State TX Zip Code 77055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Secondary School Counselor Occupation (for Individual) Spring Branch ISD
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 530.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11AI.5429
 Amount of Each Receipt this Period 15.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	630.00
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 16
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Litton, Beverly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1433 Cedar Post Ln #5
 City Houston State TX Zip Code 77055
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Secondary School Counselor Occupation (for Individual) Spring Branch ISD
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 545.00

Date of Receipt 11 / 03 / 2018
Transaction ID : SA11AI.5430
 Amount of Each Receipt this Period 15.00
 Memo Item
 Donation

B. Louden, G. Malcolm, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 W 7th St Suite 1007
 City Fort Worth State TX Zip Code 76102
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) President Occupation (for Individual) Walsh Holdings, LLC
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 01 / 2018
Transaction ID : SA11AI.5416
 Amount of Each Receipt this Period 250.00
 Memo Item
 Donation

C. McPherson, ret, LTC David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1303 Evergreen Dr
 City Sturgis State SD Zip Code 57785
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) None Occupation (for Individual) Retired
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2018
Transaction ID : SA11AI.5308
 Amount of Each Receipt this Period 250.00
 Memo Item
 Donation

SUBTOTAL of Receipts This Page (optional).....	515.00
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 16
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sweatt, nancy, , ,

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ret atty	Occupation (for Individual) self
-----------------------------------------------	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		02		2018

Transaction ID : SA11AI.5698

Amount of Each Receipt this Period
100.00

Memo Item
Donation

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ret atty	Occupation (for Individual) self
-----------------------------------------------	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2018

Transaction ID : SA11AI.5699

Amount of Each Receipt this Period
50.00

Memo Item
Donation

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

Name of Employer (for Individual) ret atty	Occupation (for Individual) self
-----------------------------------------------	-------------------------------------

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		06		2018

Transaction ID : SA11AI.5700

Amount of Each Receipt this Period
25.00

Memo Item
Donation

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 16
(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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wassmer, Pedro, , ,

Mailing Address 642 Bougainvillea Rd

City Naples	State FL	Zip Code 34102
----------------	-------------	-------------------

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

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2018

Transaction ID : SA11A1.5151

Amount of Each Receipt this Period
250.00

Memo Item
Donation

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	2320.00

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 2211 N First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 23 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5815
Amount of Each Disbursement this Period
261.71

Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 2211 N First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5817
Amount of Each Disbursement this Period
133.80

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 2211 N First St

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

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

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 16 / 2018

FEC Identification Number

C
Transaction ID : SB21B.5818
Amount of Each Disbursement this Period
313.52

Memo Item

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

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

709.03

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street
ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement
Legal and compliance

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
11 / 07 / 2018

FEC Identification Number

C
Transaction ID : SB21B.4882
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

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

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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)..... ▶

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

500.00

1209.03

**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

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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial) A. DESANTIS, RONALD D, , ,		Date of Disbursement MM / DD / YYYY 10 / 25 / 2018
Mailing Address PO BOX 1425		FEC Identification Number C S6FL00293 Transaction ID : SB23.5808
City PONTE VEDRA BEACH	State FL	Zip Code 32004
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name DESANTIS, RONALD D, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 00		

Full Name (Last, First, Middle Initial) B. EDWARDS, EDDIE, , ,		Date of Disbursement MM / DD / YYYY 10 / 18 / 2018
Mailing Address PO BOX 251		FEC Identification Number C H8NH01152 Transaction ID : SB23.5805
City DOVER	State NH	Zip Code 03821
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 250.00
Candidate Name EDWARDS, EDDIE, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NH District: 01		

Full Name (Last, First, Middle Initial) C. GRANT, ANDREW, , ,		Date of Disbursement MM / DD / YYYY 10 / 31 / 2018
Mailing Address 1750 PRAIRIE CITY ROAD APT 130 PMB 169		FEC Identification Number C H8CA07056 Transaction ID : SB23.5810
City FOLSOM	State CA	Zip Code 95630
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 500.00
Candidate Name GRANT, ANDREW, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 07		

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

1250.00

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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)
A. TAYLOR, SCOTT W. MR., , ,

Date of Disbursement: / /

Mailing Address: PO BOX 66528

City: VIRGINIA BEACH State: VA Zip Code: 23466

Purpose of Disbursement: Contribution

Candidate Name: _____

Office Sought: House Disbursement For: 2018
 Senate Primary General
 President Other (specify) ▼

State: VA District: 02

FEC Identification Number: **C** H0VA02118
Transaction ID : SB23.5807
Amount of Each Disbursement this Period:
 Memo Item

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

Date of Disbursement: / /

Mailing Address: 437 OCEAN GROVE CIRCLE

City: ST AUGUSTINE State: FL Zip Code: 32080

Purpose of Disbursement: Contribution

Candidate Name: _____

Office Sought: House Disbursement For: 2018
 Senate Primary General
 President Other (specify) ▼

State: FL District: 06

FEC Identification Number: **C** H8FL06148
Transaction ID : SB23.5813
Amount of Each Disbursement this Period:
 Memo Item

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

Date of Disbursement: / /

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: **C** _____
Amount of Each Disbursement this Period:
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="1750.00"/>

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Content Creation and List Rental
Name of Federal Candidate: JAMES, JOHN, , Support
Office Sought: Senate State: MI
Disbursement For: General 2018
Amount 6885.00
Transaction ID: SE.5798

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Content Creation and List Rental
Name of Federal Candidate: TAYLOR, SCOTT W. MR., , Support
Office Sought: House State: VA
Disbursement For: General 2018
Amount 5265.00
Transaction ID: SE.5801

(a) SUBTOTAL of Itemized Independent Expenditures 12150.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hornaday, Alexander, , [Electronically Filed] Date 03 / 06 / 2019
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Content Createion and list rental
Name of Federal Candidate: MCSALLY, MARTHA, , , Support
Calendar Year-To-Date Per Election for Office Sought 15995.00
Disbursement For: General 2018

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For: Primary General

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 7065.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 19215.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hornaday, Alexander, , ,

[Electronically Filed]

Date 03 / 06 / 2019

Signature