

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 Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)

ADDRESS (number and street) 5915 Eastman Avenue, Suite 100 Check if different than previously reported. (ACC) Midland MI 48640

2. FEC IDENTIFICATION NUMBER C C00583526 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] 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 Report (Non-election Year Only) (MY) [X], Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2019 through 06 / 30 / 2019

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

Signature of Treasurer Holzauer, Kim D., , , [Electronically Filed] Date 07 / 31 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="146.67"/>	<input type="text" value="146.67"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="146.67"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="36535.16"/>	<input type="text" value="36535.16"/>
(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="36681.83"/>	<input type="text" value="36681.83"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="26027.88"/>	<input type="text" value="26027.88"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10653.95"/>	<input type="text" value="10653.95"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="675.00"/>	

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

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2019

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).....	12000.00	12000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12000.00	12000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	24500.00	24500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	36500.00	36500.00
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).....	35.16	35.16
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)).....▶	36535.16	36535.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	36535.16	36535.16

**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 .....	21027.88	21027.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	21027.88	21027.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
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)) ..	26027.88	26027.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26027.88	26027.88

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	36500.00	36500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36500.00	36500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	21027.88	21027.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	35.16	35.16
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	20992.72	20992.72

**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 22
	<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. Carey, Stephen, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1411 Russell Road  
 City Alexandria State VA Zip Code 22301  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **01 / 14 / 2019**  
**Transaction ID : SA11AI.4522**  
 Amount of Each Receipt this Period 1500.00  
 Memo Item #18

**B. Foster, Behrends B., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1722 N Nelson Street  
 City Arlington State VA Zip Code 22207  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bluestone Strategies LLC Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 16 / 2019**  
**Transaction ID : SA11AI.4585**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item #23

**C. Guzik, John M., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7908 Oak Hollow Lane  
 City Fairfax Station State VA Zip Code 22039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Franklin Partnership LLP Occupation (for Individual) Partner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **04 / 16 / 2019**  
**Transaction ID : SA11AI.4583**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item #23

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 22
	<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. Pechanga Band of Luiseno Indians**

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

Mailing Address PO Box 1477

City Temecula	State CA	Zip Code 92593
------------------	-------------	-------------------

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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2019

**Transaction ID : SA11AI.4597**

Amount of Each Receipt this Period  
2000.00

Memo Item  
#25

**B. Rowland, James A., , ,**

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

Mailing Address 410 First Street, SE Suite 300

City Washington	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
Rowland Strategy Group, LLC Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2019

**Transaction ID : SA11AI.4575**

Amount of Each Receipt this Period  
1500.00

Memo Item  
#22

**C. Yocha Dehe Wintun Nation**

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

Mailing Address PO Box 18

City Brooks	State CA	Zip Code 95606
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2019

**Transaction ID : SA11AI.4598**

Amount of Each Receipt this Period  
5000.00

Memo Item  
#25

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 22
<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)**

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

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON State DC Zip Code 20036

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2019

**Transaction ID : SA11C.4579**

Amount of Each Receipt this Period  
5000.00

Memo Item  
#22

**B. AMERICAN CHEMISTRY COUNCIL PAC**

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

Mailing Address 700 2ND STREET, NE

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00252338

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2019

**Transaction ID : SA11C.4528**

Amount of Each Receipt this Period  
2500.00

Memo Item  
#19

**C. AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD State MN Zip Code 56560

FEC ID number of contributing federal political committee. **C** C00110338

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2019

**Transaction ID : SA11C.4542**

Amount of Each Receipt this Period  
5000.00

Memo Item  
#20

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. DELTA AIR LINES POLITICAL ACTION COMMITTEE**

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

Mailing Address 1212 NEW YORK AVENUE NW  
SUITE 200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00104802

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2019

**Transaction ID : SA11C.4530**

Amount of Each Receipt this Period  
2500.00

Memo Item  
#19

**B. DTE ENERGY COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address ONE ENERGY PLAZA  
ROOM 1583 WCB

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C** C00081547

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2019

**Transaction ID : SA11C.4621**

Amount of Each Receipt this Period  
2500.00

Memo Item  
#26

**C. DTE ENERGY COMPANY POLITICAL ACTION COMMITTEE**

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

Mailing Address ONE ENERGY PLAZA  
ROOM 1583 WCB

City DETROIT State MI Zip Code 48226

FEC ID number of contributing federal political committee. **C** C00081547

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2019

**Transaction ID : SA11C.4627**

Amount of Each Receipt this Period  
2500.00

Memo Item  
#27

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. DYKEMA GOSSETT FEDERAL PAC**

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

Mailing Address 201 TOWNSEND STREET  
SUITE 900

City LANSING State MI Zip Code 48933

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 25 / 2019

**Transaction ID : SA11C.4622**

Amount of Each Receipt this Period  
1000.00

Memo Item  
#26

**B. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

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

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2019

**Transaction ID : SA11C.4532**

Amount of Each Receipt this Period  
1000.00

Memo Item  
#19

**C. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**

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

Mailing Address 2941 FAIRVIEW PARK DR.  
SUITE 100

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00078451

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2019

**Transaction ID : SA11C.4574**

Amount of Each Receipt this Period  
1500.00

Memo Item  
#21

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 11 OF 22  
(check only one)

<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)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

**A. PROFESSIONAL COMPOUNDING CENTERS OF AMERICA PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9901 SOUTH WILCREST DR

City HOUSTON	State TX	Zip Code 77099
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FEC ID number of contributing federal political committee. **C** C00558452

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
05		16		2019

**Transaction ID : SA11C.4595**

Amount of Each Receipt this Period  
1000.00

Memo Item  
#24

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

Mailing Address

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

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

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M	/	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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	24500.00

**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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Altria Client Services LLC**

Mailing Address 101 Constitution Ave, NW  
Suite 400W

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Suite Rental, Tickets for Event

003  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4537  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Accounting Services

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4535  
Amount of Each Disbursement this Period  
217.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Accounting Services

001  
Category/  
Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4540  
Amount of Each Disbursement this Period  
387.00

Memo Item

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

2604.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement Accounting Services

001  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.4571**  
 Amount of Each Disbursement this Period  
 306.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement Accounting services

001  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
05 / 21 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.4599**  
 Amount of Each Disbursement this Period  
 163.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement Accounting Services

001  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 25 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.4620**  
 Amount of Each Disbursement this Period  
 610.00

Memo Item

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

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

1079.00

**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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Andrews Hooper Pavlik, PLC**

Mailing Address 5915 Eastman Avenue, Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement Accounting Services

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			3	0			2	0	1	9		

FEC Identification Number  
  
**Transaction ID : SB21B.4628**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement Credit card payment - Itemized

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	1	9		

FEC Identification Number  
  
**Transaction ID : SB21B.4546**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement Credit card payment - Itemized

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	5			2	0	1	9		

FEC Identification Number  
  
**Transaction ID : SB21B.4549**  
 Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address 1200 12th Avenue S  
Suite 1200

City Seattle State WA Zip Code 98144

Purpose of Disbursement  
Supplies for event

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4549.1**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address PO Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement  
Credit card payment - Itemized

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4560**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Vail Backcountry Tours**

Mailing Address 2111 N. Frontage W #H

City Vail State CO Zip Code 81657

Purpose of Disbursement  
Event activity

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.4560.**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit card payment - Itemized

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	22	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4572

Amount of Each Disbursement this Period

[REDACTED] 4000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Four Seasons Vail**

Mailing Address 1 Vail Road

City  
Vail

State  
CO

Zip Code  
81657

Purpose of Disbursement  
Event food, beverages, accomodations

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	24	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4572.c

Amount of Each Disbursement this Period

[REDACTED] 4000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit card payment - Itemized

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	04	/	2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4586

Amount of Each Disbursement this Period

[REDACTED] 9804.28

Memo Item

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

[REDACTED] 13804.28

**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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Four Seasons Vail**

Mailing Address 1 Vail Road

City Vail State CO Zip Code 81657

Purpose of Disbursement Accomodations, catering for event

001  
 002  
 003  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
01 / 24 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4586.1  
Amount of Each Disbursement this Period  
6994.27

Memo Item

Full Name (Last, First, Middle Initial)

**B. Delta Airlines**

Mailing Address 1030 Delta Blvd

City Atlanta State GA Zip Code 30354

Purpose of Disbursement Airfare for Event

001  
 002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4586.1  
Amount of Each Disbursement this Period  
838.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capital One Arena**

Mailing Address 601 F Street

City Washington State DC Zip Code 20004

Purpose of Disbursement Event Tickets

001  
 002  
 003  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.4586.  
Amount of Each Disbursement this Period  
1538.48

Memo Item

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

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

0.00

**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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit card fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	9

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4586.:**

Amount of Each Disbursement this Period

[REDACTED] 208.51

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit card fees

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	1	9

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4586.4**

Amount of Each Disbursement this Period

[REDACTED] 225.02

Memo Item

Full Name (Last, First, Middle Initial)

**C. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit card payment - itemized

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	9

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4601**

Amount of Each Disbursement this Period

[REDACTED] 166.28

Memo Item

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

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

[REDACTED] 166.28

[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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. Cardmember Service**

Mailing Address PO Box 94014

City  
Palatine

State  
IL

Zip Code  
60094-4014

Purpose of Disbursement  
Credit Card Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : SB21B.4601.1**  
Amount of Each Disbursement this Period  
**166.28**

Memo Item

Full Name (Last, First, Middle Initial)

**B. United Airlines**

Mailing Address 233 S Wacker Drive

City  
Chicago

State  
IL

Zip Code  
60606

Purpose of Disbursement  
Airfare

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : SB21B.4547**  
Amount of Each Disbursement this Period  
**971.20**

Memo Item

Full Name (Last, First, Middle Initial)

**C. United Airlines**

Mailing Address 233 S Wacker Drive

City  
Chicago

State  
IL

Zip Code  
60606

Purpose of Disbursement  
Airfare

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C**  
**Transaction ID : SB21B.4548**  
Amount of Each Disbursement this Period  
**731.60**

Memo Item

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

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

**0.00**

**20924.72**

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. BRIAN FITZPATRICK FOR CONGRESS**

Mailing Address PO BOX 939

City  
LANGHORNE

State  
PA

Zip Code  
19047

Purpose of Disbursement  
Contribution to Federal Candidate

011

Category/  
Type

Candidate Name

**FITZPATRICK, BRIAN, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: PA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	9		

FEC Identification Number

C C00607416

**Transaction ID : SB23.4615**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. JAIME FOR CONGRESS**

Mailing Address PO BOX 1614

City  
RIDGEFIELD

State  
WA

Zip Code  
98642

Purpose of Disbursement  
Contribution to Federal Candidate

011

Category/  
Type

Candidate Name

**HERRERA BEUTLER, JAIME, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify)

State: WA District: 03

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	9		

FEC Identification Number

C C00472704

**Transaction ID : SB23.4614**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. JOHN CARTER FOR CONGRESS**

Mailing Address 201 UNIVERSITY OAKS BLVD.  
SUITE 540 # 148

City  
ROUND ROCK

State  
TX

Zip Code  
78665

Purpose of Disbursement  
Contribution to Federal Candidate

011

Category/  
Type

Candidate Name

**CARTER, JOHN R. REP., , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

State: TX District: 31

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	9		

FEC Identification Number

C C00371203

**Transaction ID : SB23.4617**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

**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)

**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

Full Name (Last, First, Middle Initial)

**A. MCCAUL FOR CONGRESS, INC**

Mailing Address 815-A BRAZOS STREET  
PMB 230

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement  
Contribution to Federal Candidate

011  
Category/  
Type

Candidate Name  
**MCCAUL, MICHAEL, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: TX District: 10

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2019

FEC Identification Number

C00392688

**Transaction ID : SB23.4610**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. UPTON FOR ALL OF US**

Mailing Address PO BOX 490

City SAINT JOSEPH State MI Zip Code 49085

Purpose of Disbursement  
Contribution to Federal Candidate

011  
Category/  
Type

Candidate Name  
**UPTON, FREDERICK STEPHEN, , ,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: MI District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 12 / 2019

FEC Identification Number

C00200584

**Transaction ID : SB23.4616**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2000.00

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

5000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Together United for Liberty, Integrity and Prosperity PAC (TULIP PAC)**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Andrews Hooper Pavlik, PLC</b>			Nature of Debt (Purpose): Accounting services
Mailing Address 5915 Eastman Avenue, Suite 100			
City Midland	State MI	Zip Code 48640	

Outstanding Balance Beginning This Period <input type="text" value="62.00"/>	<b>Transaction ID : SD10.4525</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="62.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cardmember Service</b>			Nature of Debt (Purpose): Credit card charges
Mailing Address PO Box 94014			
City Palatine	State IL	Zip Code 60094-4014	

Outstanding Balance Beginning This Period <input type="text" value="1702.80"/>	<b>Transaction ID : SD10.4545</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1702.80"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Cardmember Service</b>			Nature of Debt (Purpose): Credit card charges
Mailing Address PO Box 94014			
City Palatine	State IL	Zip Code 60094-4014	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	<b>Transaction ID : SD10.4623</b>	
Amount Incurred This Period <input type="text" value="675.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="675.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="675.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="675.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="675.00"/>