

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OORAH! POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 3743

Check if different than previously reported. (ACC)

CARMEL

IN

46082

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00551853

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- 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) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)
- Election on / / in the State of

(d) 30-Day POST-Election Report for the:

- General (30G)
 - Runoff (30R)
 - Special (30S)
- Election on / / in the State of

5. Covering Period

/ / through / /

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

WUSLICH, JEFF, , ,

Type or Print Name of Treasurer

Signature of Treasurer

WUSLICH, JEFF, , ,

[Electronically Filed]

Date

/ /

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

Office Use Only

FEC FORM 3X Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

OORAH! POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		203473.42
(b) Cash on Hand at Beginning of Reporting Period.....	133387.34	
(c) Total Receipts (from Line 19)	32218.79	34718.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	165606.13	238192.21
7. Total Disbursements (from Line 31).....	93141.09	165727.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	72465.04	72465.04
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

OORAH! POLITICAL ACTION COMMITTEE

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	2500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	2500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	12500.00
12. Transfers From Affiliated/Other Party Committees.....	22218.79	22218.79
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)).....▶	32218.79	34718.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	32218.79	34718.79

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	3141.09	65727.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3141.09	65727.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	90000.00	100000.00
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)) ..	93141.09	165727.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	93141.09	165727.17

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)	10000.00	12500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	12500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	3141.09	65727.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3141.09	65727.17

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

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

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

A. PFIZER PAC

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

Mailing Address 235 E. 42ND STREET

City NEW YORK	State NY	Zip Code 10017-5703
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00016683

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
03	/	24	/	2021

Transaction ID : SA11C.80799

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. THE CAPITAL GROUP COMPANIES INC. PAC

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

Mailing Address 333 S HOPE STREET

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

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
03	/	16	/	2021

Transaction ID : SA11C.80315

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

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

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

A. YOUNG VICTORY COMMITTEE II

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO BOX 3743

City CARMEL	State IN	Zip Code 46082-3743
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00696484

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
22218.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2021

Transaction ID : SA12.78260

Amount of Each Receipt this Period
22218.79

Memo Item
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

B. BECK, LAWRENCE, , MR.,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 6401 E. 276TH STREET

City ATLANTA	State IN	Zip Code 46031-9617
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
BECK'S HYBRIDS CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2021

Transaction ID : SA.75829.15.2101

Amount of Each Receipt this Period
4800.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG VICTORY COMMITTEE 2

C. CHAMBERS, JOHN, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3230 ALEXIS DRIVE

City PALO ALTO	State CA	Zip Code 94304-1331
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
JC2 VENTURES FOUNDER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
4800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2021

Transaction ID : SA.75831.15.2101

Amount of Each Receipt this Period
4800.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG VICTORY COMMITTEE 2

SUBTOTAL of Receipts This Page (optional).....	22218.79
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 type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. HEGYI, ALBERT, P.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 795 HULLS FARM ROAD
 City SOUTHPORT State CT Zip Code 06890-1029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) 1ST FINANCIAL BANK USA Occupation (for Individual) BANKER
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00

Date of Receipt 01 / 28 / 2021
Transaction ID : SA.73123.15.2101
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM YOUNG VICTORY COMMITTEE 2

B. SCHROEDER, JOHN, C.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1106 HARRELTON CT
 City EVANSVILLE State IN Zip Code 47714-0702
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WABASH PLASTICS, INC. Occupation (for Individual) PRESIDENT, CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 4800.00

Date of Receipt 03 / 07 / 2021
Transaction ID : SA.76870.15.2101
 Amount of Each Receipt this Period 4800.00
 Memo Item
 TRANSFER
 TRANSFER FROM YOUNG VICTORY COMMITTEE 2

C. TOBIAS, DEBORAH, F., MS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10330 LAUREL RIDGE LANE
 City CARMEL State IN Zip Code 46032-8818
 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 2200.00

Date of Receipt 02 / 01 / 2021
Transaction ID : SA.74589.15.2101
 Amount of Each Receipt this Period 2200.00
 Memo Item
 TRANSFER
 TRANSFER FROM YOUNG VICTORY COMMITTEE 2

SUBTOTAL of Receipts This Page (optional)..... 0.00
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 type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
TOBIAS, RANDALL, L., AMB.,

Mailing Address 10330 LAUREL RIDGE LANE

City CARMEL	State IN	Zip Code 46032-8818
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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 ▼
2200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2021

Transaction ID : SA.74590.15.2101

Amount of Each Receipt this Period
2200.00

Memo Item
TRANSFER

TRANSFER FROM YOUNG VICTORY COMMITTEE 2

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 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).....	0.00
TOTAL This Period (last page this line number only).....	22218.79

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BROGHAMER CONSULTING LLC		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address 502 MONROE ST		FEC Identification Number C [] Transaction ID : SB21B.I1206 Amount of Each Disbursement this Period 2546.52
City NEWPORT	State KY	Zip Code 41071-2006
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. JOE'S SEAFOOD, PRIME STEAK & STONE CRAB		Date of Disbursement MM / DD / YYYY 03 / 17 / 2021
Mailing Address 750 15TH ST NW		FEC Identification Number C [] Transaction ID : SB21B.I1209C Amount of Each Disbursement this Period 594.57
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement FOOD/BEVERAGE		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []
City	State	Zip Code
Purpose of Disbursement		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3141.09
TOTAL This Period (last page this line number only).....▶	3141.09

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. BOOZMAN FOR ARKANSAS		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address PO BOX 671		FEC Identification Number C00476317 Transaction ID : SB23.I12074
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name BOOZMAN, SEN., JOHN, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District:	

Full Name (Last, First, Middle Initial) B. BOOZMAN FOR ARKANSAS		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address PO BOX 671		FEC Identification Number C00476317 Transaction ID : SB23.I12098
City ROGERS	State AR	Zip Code 72757
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name BOOZMAN, SEN., JOHN, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: AR	District:	

Full Name (Last, First, Middle Initial) C. FRIENDS OF TODD YOUNG, INC.		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address PO BOX 3743		FEC Identification Number C00459255 Transaction ID : SB23.I12068
City CARMEL	State IN	Zip Code 46082
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name YOUNG, TODD , CHRISTOPHER, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IN	District:	

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JOHN THUNE

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name THUNE, JOHN, R., ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: SD District:

Date of Disbursement 03 / 16 / 2021

FEC Identification Number C00409581
Transaction ID : SB23.I12071
Amount of Each Disbursement this Period 5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. FRIENDS OF MIKE LEE INC

Mailing Address PO BOX 1537

City SALT LAKE CITY State UT Zip Code 84110

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name LEE, MIKE, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: UT District:

Date of Disbursement 03 / 16 / 2021

FEC Identification Number C00473827
Transaction ID : SB23.I12073
Amount of Each Disbursement this Period 5000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. FRIENDS OF JOHN THUNE

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name THUNE, JOHN, R., ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: SD District:

Date of Disbursement 03 / 16 / 2021

FEC Identification Number C00409581
Transaction ID : SB23.I12076
Amount of Each Disbursement this Period 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. HOEVEN FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address PO BOX 861		FEC Identification Number C 000473371 Transaction ID : SB23.I12099
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name HOEVEN, JOHN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: ND	District:	

Full Name (Last, First, Middle Initial) B. HOEVEN FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address PO BOX 861		FEC Identification Number C 000473371 Transaction ID : SB23.I12102
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name HOEVEN, JOHN, , ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: ND	District:	

Full Name (Last, First, Middle Initial) C. JOHN KENNEDY FOR US		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address 2900 CLEARVIEW PKWY SUITE 206		FEC Identification Number C 000608398 Transaction ID : SB23.I12070
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name KENNEDY, JOHN, NEELY, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: LA	District:	

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

15000.00

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

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

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

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

Full Name (Last, First, Middle Initial) A. JOHN KENNEDY FOR US		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address 2900 CLEARVIEW PKWY SUITE 206		FEC Identification Number C 000608398 Transaction ID : SB23.I12075 Amount of Each Disbursement this Period 5000.00
City METAIRIE	State LA	Zip Code 70006
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name KENNEDY, JOHN, NEELY, ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: LA	District:	

Full Name (Last, First, Middle Initial) B. MORAN FOR KANSAS		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address PO BOX 1151		FEC Identification Number C 000458315 Transaction ID : SB23.I12072 Amount of Each Disbursement this Period 5000.00
City HAYS	State KS	Zip Code 67601-1151
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name MORAN, JERRY, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: KS	District:	

Full Name (Last, First, Middle Initial) C. MORAN FOR KANSAS		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address PO BOX 1151		FEC Identification Number C 000458315 Transaction ID : SB23.I12077 Amount of Each Disbursement this Period 5000.00
City HAYS	State KS	Zip Code 67601-1151
Purpose of Disbursement POLITICAL CONTRIBUTION		Category/Type
Candidate Name MORAN, JERRY, , ,		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. TIM SCOTT FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 1405 ASHLEY RIVER RD		FEC Identification Number C 000540302 Transaction ID : SB23.I12100
City CHARLESTON	State SC	Zip Code 29407-5305
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name SCOTT, TIMOTHY, E, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District:	

Full Name (Last, First, Middle Initial) B. TIM SCOTT FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 24 / 2021
Mailing Address 1405 ASHLEY RIVER RD		FEC Identification Number C 000540302 Transaction ID : SB23.I12103
City CHARLESTON	State SC	Zip Code 29407-5305
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name SCOTT, TIMOTHY, E, ,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State: SC	District:	

Full Name (Last, First, Middle Initial) C. INDIANA REPUBLICAN STATE COMMITTEE, INC.		Date of Disbursement MM / DD / YYYY 03 / 16 / 2021
Mailing Address 101 WEST OHIO STREET SUITE 2200		FEC Identification Number C 00006486 Transaction ID : SB23.I12069
City INDIANAPOLIS	State IN	Zip Code 46204-4207
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name		Category/Type
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).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	90000.00