



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Legacy Political Fund

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"/>	<input type="text" value="7104.24"/>	<input type="text" value="7104.24"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7104.24"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="4610.84"/>	<input type="text" value="4610.84"/>
(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="11715.08"/>	<input type="text" value="11715.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="350.00"/>	<input type="text" value="350.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="11365.08"/>	<input type="text" value="11365.08"/>
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="62600.92"/>	

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

**Legacy Political Fund**

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	0.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	4610.84	4610.84
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)).....▶	4610.84	4610.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4610.84	4610.84

**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 .....	208.00	208.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	208.00	208.00
22. Transfers to Affiliated/Other Party Committees.....	100.00	100.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	42.00	42.00
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)) ..	350.00	350.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	350.00	350.00

**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) .....	0.00	0.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	208.00	208.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	208.00	208.00

**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 6 OF 22
<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

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)  
**Legacy Political Fund**

**A. 2018 REPUBLICAN CHALLENGERS FUND (2018 RCF)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314
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FEC ID number of contributing federal political committee. **C** C00655589

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
441.35

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

**Transaction ID : SA12.7799**

Amount of Each Receipt this Period  
441.35

Memo Item  
JFC Transfer

**B. Sellers, R. Scot, , ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 11757 Magnolia Park Ct

City Las Vegas	State NV	Zip Code 89141
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
519.48

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		27		2017

**Transaction ID : SA12.7799.0**

Amount of Each Receipt this Period  
519.48

Memo Item  
Transfer Memo

**C. 2018 REPUBLICAN CHALLENGERS FUND II**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00669317

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4169.49

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

**Transaction ID : SA12.7804**

Amount of Each Receipt this Period  
4169.49

Memo Item  
JFC Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4610.84
<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 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)  
**Legacy Political Fund**

**A. Byrd, William, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35 S Royal Fern Dr  
 City The Woodlands State TX Zip Code 77380  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RCP Inc. Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **03 / 07 / 2018**  
**Transaction ID : SA12.7804.0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

**B. Hevrdejs, Frank, J., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Greenway Plz Suite 2400  
 City Houston State TX Zip Code 77046  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sterling Group Occupation (for Individual) Private Equity  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt **03 / 09 / 2018**  
**Transaction ID : SA12.7804.1**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

**C. Miller, Olivia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17430 Campbell Rd #230  
 City Dallas State TX Zip Code 75252  
 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 ▼ 100.00

Date of Receipt **03 / 13 / 2018**  
**Transaction ID : SA12.7804.2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 8 OF 22
<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)  
**Legacy Political Fund**

**A. Miller, Rodney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17430 Campbell Rd #230  
 City Dallas State TX Zip Code 75252  
 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 ▼ 100.00

Date of Receipt **03 / 13 / 2018**  
**Transaction ID : SA12.7804.3**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

**B. Minyard, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 Innisbrook  
 City Frisco State TX Zip Code 75034  
 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 ▼ 40.00

Date of Receipt **03 / 13 / 2018**  
**Transaction ID : SA12.7804.4**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Transfer Memo

**C. Birdwell, Ashley, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Oaklawn Dr  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt **03 / 15 / 2018**  
**Transaction ID : SA12.7804.5**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 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)  
**Legacy Political Fund**

**A. Birdwell, Steven R., , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Oaklawn Dr  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Remedial Construction Services Occupation (for Individual) President/CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2018  
**Transaction ID : SA12.7804.6**  
 Amount of Each Receipt this Period 50.00  
 Memo Item  
 Transfer Memo

**B. Atnipp, Douglas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11110 N Country Squire St  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Winston Strawn LLP Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2018  
**Transaction ID : SA12.7804.7**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
 Transfer Memo]

**C. Atnipp, Veronica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11110 N Country Squire Rd  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Publishing Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2018  
**Transaction ID : SA12.7804.8**  
 Amount of Each Receipt this Period 1250.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 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)  
**Legacy Political Fund**

**A. Goodman, John, C., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6335 W Northwest Hwy #2111

City Dallas State TX Zip Code 75225

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

Name of Employer (for Individual) The Goodman Institute Occupation (for Individual) President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt 03 / 26 / 2018  
**Transaction ID : SA12.7804.9**

Amount of Each Receipt this Period 20.00

Memo Item  
Transfer Memo

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

Mailing Address 13107 Tosca Ln

City Houston State TX Zip Code 77079

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

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

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 03 / 27 / 2018  
**Transaction ID : SA12.7804.10**

Amount of Each Receipt this Period 50.00

Memo Item  
Transfer Memo

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

Mailing Address 13107 Tosca Ln

City Houston State TX Zip Code 77079

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

Name of Employer (for Individual) AmTex Machine Products Occupation (for Individual) President

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 50.00

Date of Receipt 03 / 27 / 2018  
**Transaction ID : SA12.7804.11**

Amount of Each Receipt this Period 50.00

Memo Item  
Transfer Memo

**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 11 OF 22
<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)  
**Legacy Political Fund**

**A. Rogers, Franelle, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2905 A West Lane Dr  
 City Houston State TX Zip Code 77027  
 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 ▼ 6.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.12**  
 Amount of Each Receipt this Period 6.00  
 Memo Item  
 Transfer Memo

**B. Thompson, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1717 Main St Suite 3900  
 City Dallas State TX Zip Code 75201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Preston Hollow Capital CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.13**  
 Amount of Each Receipt this Period 400.00  
 Memo Item  
 Transfer Memo

**C. Hobson, Ann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4237 Armstrong Pkwy  
 City Dallas State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Self Employed Investor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.14**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6.00
<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 12 OF 22
<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)  
**Legacy Political Fund**

**A. Hobson, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4237 Armstrong Pkwy  
 City Dallas State TX Zip Code 75205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Highside Capital Management Occupation (for Individual) Investor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 100.00

Date of Receipt 03 / 28 / 2018  
**Transaction ID : SA12.7804.15**  
 Amount of Each Receipt this Period 100.00  
 Memo Item  
 Transfer Memo

**B. Hendrick, Tom, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3601 Twin Lakes Way  
 City Plano State TX Zip Code 75093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TCH Partners, LLC Occupation (for Individual) Hotel Developer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 03 / 28 / 2018  
**Transaction ID : SA12.7804.16**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Transfer Memo

**C. Hendrick, Judy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3601 Twin Lakes Way  
 City Plano State TX Zip Code 75093  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Aimsbridge Hospitality Occupation (for Individual) CFO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt 03 / 28 / 2018  
**Transaction ID : SA12.7804.17**  
 Amount of Each Receipt this Period 20.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 13 OF 22
<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)  
**Legacy Political Fund**

**A. Cole, Thomas, B., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2300 Wolf St  
 Unit 15B  
 City Dallas State TX Zip Code 75201  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Ansira Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.18**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item  
 Transfer Memo

**B. Elsenbrook, Lesha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Pine Crescent Ct  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Homemaker Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.19**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 Transfer Memo

**C. Elsenbook, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 Pine Crescent Ct  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Alvarez & Marsal Business Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.20**  
 Amount of Each Receipt this Period  
 200.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 14 OF 22
<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)  
**Legacy Political Fund**

**A. Wallis, Debbie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3200 Summerfield Dr  
 City Richardson State TX Zip Code 75082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.21**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Transfer Memo

**B. Wallis, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3200 Summerfield Dr  
 City Richardson State TX Zip Code 75082  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WS Group Occupation (for Individual) Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.22**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Transfer Memo

**C. Kidd, Bret, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 Welford Ln  
 City Southlake State TX Zip Code 76092  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travelport Occupation (for Individual) IT Services Executive  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 80.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2018  
**Transaction ID : SA12.7804.23**  
 Amount of Each Receipt this Period 80.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 15 OF 22
<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)  
**Legacy Political Fund**

**A. Francisco, Ellie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 440 Plnehaven Dr  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Event Planner  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00

Date of Receipt **03 / 28 / 2018**  
**Transaction ID : SA12.7804.24**  
 Amount of Each Receipt this Period 10.00  
 Memo Item  
 Transfer Memo

**B. Roff, Hugh, , , Jr.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 Travis St Suite 7070  
 City Houston State TX Zip Code 77002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Roff Resources, LLC Occupation (for Individual) Chairman of the Board  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 40.00

Date of Receipt **03 / 29 / 2018**  
**Transaction ID : SA12.7804.25**  
 Amount of Each Receipt this Period 40.00  
 Memo Item  
 Transfer Memo

**C. Taylor, Steve, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 515 Santa Paula Dr  
 City Salinas State CA Zip Code 93901  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Veritas V Occupation (for Individual) Retired CEO  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt **03 / 29 / 2018**  
**Transaction ID : SA12.7804.26**  
 Amount of Each Receipt this Period 300.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 16 OF 22
<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)  
**Legacy Political Fund**

**A. Kirby, Steven, T., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 101 S Philips Ave  
 Suite 501  
 City Sioux Falls State SD Zip Code 57104  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bluestem Capital Occupation (for Individual) Founding Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 329.41

Date of Receipt **03 / 29 / 2018**  
**Transaction ID : SA12.7804.27**  
 Amount of Each Receipt this Period 329.41  
 Memo Item  
 Transfer Memo

**B. Markham, Mary Carol, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6143 Holly Springs  
 City Houston State TX Zip Code 77057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt **03 / 30 / 2018**  
**Transaction ID : SA12.7804.28**  
 Amount of Each Receipt this Period 5.00  
 Memo Item  
 Transfer Memo

**C. Markham, Daniel, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6143 Holly Springs Dr  
 City Houston State TX Zip Code 77057  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Dentist  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5.00

Date of Receipt **03 / 30 / 2018**  
**Transaction ID : SA12.7804.29**  
 Amount of Each Receipt this Period 5.00  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<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 17 OF 22
<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)  
**Legacy Political Fund**

**A. Holsenbeck, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10 Lana Ln  
 City Houston State TX Zip Code 77027  
 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 ▼ 40.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2018  
**Transaction ID : SA12.7804.30**  
 Amount of Each Receipt this Period  
 40.00  
 Memo Item  
 Transfer Memo

**B. Nau, Barbara, E., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 130130  
 City Houston State TX Zip Code 77219  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2018  
**Transaction ID : SA12.7804.31**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
 Transfer Memo

**C. Rose, Douglas, C., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10550 Hussey Ln  
 City Carmel State IN Zip Code 46032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Irwin R. Rose & Co. LLC Occupation (for Individual) Real Estate Investments  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 294.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 30 / 2018  
**Transaction ID : SA12.7804.32**  
 Amount of Each Receipt this Period  
 294.12  
 Memo Item  
 Transfer Memo

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	4610.84

**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 checked="" 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)  
**Legacy Political Fund**

**A. 2018 REPUBLICAN CHALLENGERS FUND II**

Full Name (Last, First, Middle Initial)  
2018 REPUBLICAN CHALLENGERS FUND II

Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement JFC Transfer

Candidate Name

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

State: District:

Date of Disbursement: 03 / 06 / 2018

FEC Identification Number: C 00669317  
Transaction ID : SB22.7797

Amount of Each Disbursement this Period: 100.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	100.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support		
Mailing Address 515 Santa Paula Dr					
City Salinas	State CA	Zip Code 93901			

Outstanding Balance Beginning This Period 5000.00			Transaction ID : SD10.6846		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00			

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support		
Mailing Address 515 Santa Paula Dr					
City Salinas	State CA	Zip Code 93901			

Outstanding Balance Beginning This Period 5000.00			Transaction ID : SD10.6847		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00			

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Non-Contribution Acct: PAC Event Deposit		
Mailing Address 515 Santa Paula Dr					
City Salinas	State CA	Zip Code 93901			

Outstanding Balance Beginning This Period 11950.00			Transaction ID : SD10.6860		
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11950.00			

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	21950.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./AV Support
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="10230.07"/>	<b>Transaction ID : SD10.6848</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10230.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="635.31"/>	<b>Transaction ID : SD10.6858</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="635.31"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="553.83"/>	<b>Transaction ID : SD10.6859</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="553.83"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="11419.21"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="612.07"/>	<b>Transaction ID : SD10.6861</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="612.07"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): PAC Event Expense: Reception/Food & Bev./Travel
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="23736.55"/>	<b>Transaction ID : SD10.7213</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="23736.55"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period <input type="text" value="1142.68"/>	<b>Transaction ID : SD10.7218</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1142.68"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="25491.30"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**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)  
**Legacy Political Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period 2060.90	Transaction ID : SD10.7219	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2060.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Taylor, Steve, , ,</b>			Nature of Debt (Purpose): Reimbursement: Travel Expense
Mailing Address 515 Santa Paula Dr			
City Salinas	State CA	Zip Code 93901	

Outstanding Balance Beginning This Period 1679.51	Transaction ID : SD10.7378	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1679.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	3740.41
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	62600.92
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	62600.92