

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**
Reclaim America PAC

ADDRESS (number and street) **228 S WASHINGTON ST STE 115**
Check if different than previously reported. (ACC) **Alexandria VA 22314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00500025 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) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) 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 03 / 01 / 2021 through 03 / 31 / 2021

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

Signature of Treasurer *Lisker, Lisa, , ,* [Electronically Filed] Date 04 / 20 / 2021

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Reclaim America 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="2021"/>	<input type="text" value=""/>	<input type="text" value="169899.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="153967.65"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="72944.36"/>	<input type="text" value="76444.36"/>
(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="226912.01"/>	<input type="text" value="246343.86"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="47567.96"/>	<input type="text" value="66999.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="179344.05"/>	<input type="text" value="179344.05"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
Reclaim America PAC

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	3500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	3500.00
(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	13500.00
12. Transfers From Affiliated/Other Party Committees.....	62944.36	62944.36
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)).....▶	72944.36	76444.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	72944.36	76444.36

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	27567.96	36999.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	27567.96	36999.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	25000.00
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	5000.00
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)) ..	47567.96	66999.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47567.96	66999.81

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	10000.00	13500.00
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	13500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	27567.96	36999.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27567.96	36999.81

**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 19
<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)
Reclaim America PAC

A. ATLAS AIR WORLDWIDE HOLDINGS, INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2000 WESTCHESTER AVE

City PURCHASE	State NY	Zip Code 10577-2539
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FEC ID number of contributing federal political committee. **C** C00478099

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	/	29	/	2021

Transaction ID : SA11C.1455889

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. HONEYWELL INTERNATIONAL PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 500W

City WASHINGTON	State DC	Zip Code 20001-2177
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FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2021

Transaction ID : SA11C.1455888

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. THE MOSAIC COMPANY POLITICAL ACTION COMMITTEE (MOSAICPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 13830 CIRCA CROSSING DRIVE

City LITHIA	State FL	Zip Code 33547-3953
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FEC ID number of contributing federal political committee. **C** C00455766

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2021

Transaction ID : SA11C.1471468

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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 19
<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)
Reclaim America PAC

A. RUBIO VICTORY COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 228 S WASHINGTON ST
 STE 115
 City ALEXANDRIA State VA Zip Code 22314-5404
 FEC ID number of contributing federal political committee. **C** C00494617
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 62944.36

Date of Receipt 03 / 31 / 2021
Transaction ID : SA12.1471469
 Amount of Each Receipt this Period 62944.36
 Memo Item
TRANSFER
 DISTRIBUTION OF NET JFC PROCEEDS-SEE MEMOS

B. BRAMAN, IRMA, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 BISCAYNE BLVD
 City MIAMI State FL Zip Code 33137-5024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 HOME MAKER HOME MAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 03 / 22 / 2021
Transaction ID : SA.1455894.1.0321
 Amount of Each Receipt this Period 4200.00
 Memo Item
TRANSFER
 TRANSFER FROM RUBIO VICTORY

C. BRAMAN, NORMAN, , MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2060 BISCAYNE BLVD 2ND FLOOR
 City MIAMI State FL Zip Code 33137-5024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 BRAMAN ENTERPRISES SELF-EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 03 / 22 / 2021
Transaction ID : SA.1455893.1.0321
 Amount of Each Receipt this Period 4200.00
 Memo Item
TRANSFER
 TRANSFER FROM RUBIO VICTORY

SUBTOTAL of Receipts This Page (optional).....	62944.36
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 19
<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)
Reclaim America PAC

A. BROWN, W L, LYONS, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 DRIFTWOOD LANDING ROAD

City DELRAY BEACH State FL Zip Code 33483-7221

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 ▼ 5000.00

Date of Receipt 03 / 18 / 2021
Transaction ID : SA.1448941.1.0321

Amount of Each Receipt this Period 5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

B. BUSCH, AUGUST, A., MR., III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MID RIVERS MALL DRIVE SUITE 210

City ST. PETERS State MO Zip Code 63376-4322

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 ▼ 5000.00

Date of Receipt 03 / 22 / 2021
Transaction ID : SA.1455892.1.0321

Amount of Each Receipt this Period 5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

C. CHILDS, JOHN, W., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 165 SAGO PALM ROAD JW CHILDS ASSOCIATES

City VERO BEACH State FL Zip Code 32963-3702

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

Name of Employer (for Individual) J.W. CHILDS AND ASSOCIATES Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 01 / 29 / 2021
Transaction ID : SA.1425499.1.0321

Amount of Each Receipt this Period 5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

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 19
<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)
Reclaim America PAC

A. DEMETREE, JAY, C., MR., JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6671 EPPING FOREST WAY NORTH

City JACKSONVILLE	State FL	Zip Code 32217-2696
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) DEMETREE BROTHERS	Occupation (for Individual) INVESTMENTS 0
--	--

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	/	29	/	2021

Transaction ID : SA.1455820.1.0321

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

B. DUCHOSSOIS, CRAIG, J., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 444 W LAKE ST STE 2000

City CHICAGO	State IL	Zip Code 60606-0040
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THE DUCHOSSOIS GROUP	Occupation (for Individual) EXECUTIVE
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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
02	/	10	/	2021

Transaction ID : SA.1430078.1.0321

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

C. HOFFMAN, AL, , AMBASSADOR, JR.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12350 SEMINOLE BEACH ROAD

City NORTH PALM BEACH	State FL	Zip Code 33408-
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
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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
02	/	26	/	2021

Transaction ID : SA.1435835.1.0321

Amount of Each Receipt this Period
2000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

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 10 OF 19
<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)
Reclaim America PAC

A. HOFFMAN, AL, , AMBASSADOR, JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12350 SEMINOLE BEACH ROAD
 City NORTH PALM BEACH State FL Zip Code 33408-
 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 ▼ 5000.00

Date of Receipt **03 / 31 / 2021**
Transaction ID : SA.1457779.1.0321
 Amount of Each Receipt this Period 3000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

B. JONES, PAUL, TUDOR, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 ROYAL PALM WAY
 City PALM BEACH State FL Zip Code 33480-4249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TUDOR INVESTMENT Occupation (for Individual) HEDGE FUND MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : SA.1461113.1.0321
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

C. JONES, SONIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 ROYAL PALM WAY
 City PALM BEACH State FL Zip Code 33480-4249
 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 ▼ 5000.00

Date of Receipt **03 / 24 / 2021**
Transaction ID : SA.1461114.1.0321
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

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 19
<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)
Reclaim America PAC

A. KHAN, CODY, , MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 243 EAGLE DRIVE

City PANAMA CITY BEACH	State FL	Zip Code 32407-2821
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HILTON INN RESORT	Occupation (for Individual) OWNER
--	--------------------------------------

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
01	/	28	/	2021

Transaction ID : SA.1425500.1.0321

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

B. MARTIRE, FRANK, R., MR.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 348 PONTE VEDRA BLVD.

City PONTE VEDRA BEACH	State FL	Zip Code 32082-1812
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NCR	Occupation (for Individual) EXECUTIVE CHAIRMAN
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

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

Transaction ID : SA.1425708.1.0321

Amount of Each Receipt this Period
1700.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

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

Mailing Address 9856 LAUREL VALLEY DRIVE

City WINDERMERE	State FL	Zip Code 34786-8911
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NPSG GLOBAL	Occupation (for Individual) PRESIDENT
--	--

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
03	/	30	/	2021

Transaction ID : SA.1456948.1.0321

Amount of Each Receipt this Period
2200.00

Memo Item
TRANSFER
TRANSFER FROM RUBIO VICTORY

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 12 OF 19
<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)
Reclaim America PAC

A. RABOIS, KEITH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1429 N VENETIAN WAY
 City MIAMI BEACH State FL Zip Code 33139-1141
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FOUNDERS FUND Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **02 / 02 / 2021**
Transaction ID : SA.1425502.1.0321
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

B. ROSE, DOUGLAS, C., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10550 HUSSEY LANE
 City CARMEL State IN Zip Code 46032-7921
 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 ▼ 5000.00

Date of Receipt **03 / 05 / 2021**
Transaction ID : SA.1441651.1.0321
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

C. WENGER, BERNICE, , MRS.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 450 S.E. FIFTH AVENUE
 City BOCA RATON State FL Zip Code 33432-5519
 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 ▼ 5000.00

Date of Receipt **03 / 22 / 2021**
Transaction ID : SA.1455891.1.0321
 Amount of Each Receipt this Period 5000.00
 Memo Item
 TRANSFER
 TRANSFER FROM RUBIO VICTORY

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 13 OF 19
<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)
Reclaim America PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WENGER, EDWARD, H., MR.,

Mailing Address 450 SE FIFTH AVENUE

City BOCA RATON State FL Zip Code 33432-5519

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 ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 22 / 2021

Transaction ID : SA.1455890.1.0321

Amount of Each Receipt this Period
5000.00

Memo Item
TRANSFER

TRANSFER FROM RUBIO VICTORY

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y 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 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).....	62944.36

**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)
Reclaim America PAC

A. HOLLER, DAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address C/O 228 S. WASHINGTON ST.
STE. 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATEGIC CONSULTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3268

Amount of Each Disbursement this Period: 1667.00

Memo Item

B. HOWD, CHRIS, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 1024 N. RANDOLPH ST.

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement TRAVEL-SEE MEMO

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3268

Amount of Each Disbursement this Period: 276.87

Memo Item

C. MARRIOTT

Full Name (Last, First, Middle Initial)

Mailing Address 1633 N BAYSHORE DR

City MIAMI State FL Zip Code 33132

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3268

Amount of Each Disbursement this Period: 276.87

Memo Item

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

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

1943.87

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial) A. HOWD, CHRIS, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021	
Mailing Address 1024 N. RANDOLPH ST.		FEC Identification Number C [] Transaction ID : SB21B.I3268I Amount of Each Disbursement this Period [] 316.80 <input type="checkbox"/> Memo Item	
City ARLINGTON	State VA	Zip Code 22201	Category/ Type []
Purpose of Disbursement ADMINISTRATIVE CONSULTING		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:	
Full Name (Last, First, Middle Initial) B. MORGAN, MARK, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021	
Mailing Address C/O 228 S. WASHINGTON ST., STE. 11		FEC Identification Number C [] Transaction ID : SB21B.I3269I Amount of Each Disbursement this Period [] 5225.00 <input type="checkbox"/> Memo Item	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type []
Purpose of Disbursement STRATEGIC CONSULTING		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:	
Full Name (Last, First, Middle Initial) C. NEEDHAM, MICHAEL, , ,		Date of Disbursement MM / DD / YYYY 03 / 31 / 2021	
Mailing Address C/O 228 S. WASHINGTON ST. STE. 115		FEC Identification Number C [] Transaction ID : SB21B.I3269I Amount of Each Disbursement this Period [] 2313.75 <input type="checkbox"/> Memo Item	
City ALEXANDRIA	State VA	Zip Code 22314	Category/ Type []
Purpose of Disbursement STRATEGIC CONSULTING		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:	
SUBTOTAL of Disbursements This Page (optional)..... ▶		[] 7855.55	
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)
Reclaim America PAC

A. BB&T FINANCIAL

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 580340

City CHARLOTTE State NC Zip Code 28258

Purpose of Disbursement CREDIT CARD PAYMENT-SEE MEMOS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3268'

Amount of Each Disbursement this Period: 572.05

Memo Item

B. INTUIT

Full Name (Last, First, Middle Initial)

Mailing Address 2632 MARINE WAY

City MTN. VIEW State CA Zip Code 94043-1126

Purpose of Disbursement SOFTWARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I32682

Amount of Each Disbursement this Period: 430.00

Memo Item

C. CMDI

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL RD., STE. 400 SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement DATA MANAGEMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3268

Amount of Each Disbursement this Period: 785.15

Memo Item

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

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

1357.20

**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)
Reclaim America PAC

A. HOLTZMAN VOGEL JOSEFIK TORCHINSKY PLLC

Full Name (Last, First, Middle Initial)

Mailing Address 15405 JOHN MARSHALL HWY

City HAYMARKET State VA Zip Code 20169

Purpose of Disbursement LEGAL FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I32693

Amount of Each Disbursement this Period: 7500.00

Memo Item

B. HUCKABY DAVIS LISKER INC.

Full Name (Last, First, Middle Initial)

Mailing Address 228 S. WASHINGTON ST, STE. 115 SUITE 115

City ALEXANDRIA State VA Zip Code 22314-5408

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 19 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I32693

Amount of Each Disbursement this Period: 2236.34

Memo Item

C. SOCKO STRATEGIES LLC

Full Name (Last, First, Middle Initial)

Mailing Address 4323 CATHEDRAL AVE., NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 22 / 2021

FEC Identification Number: C

Transaction ID : SB21B.I3269

Amount of Each Disbursement this Period: 6668.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	16404.34
TOTAL This Period (last page this line number only).....▶	27560.96

**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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. GRASSLEY COMMITTEE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2021

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

FEC Identification Number

C C00230482

Transaction ID : SB23.I32690

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

Category/Type

Candidate Name

GRASSLEY, CHARLES, E, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: IA District:

Memo Item

Full Name (Last, First, Middle Initial)
B. GRASSLEY COMMITTEE, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	31	/	2021

Mailing Address PO BOX 1000

City DES MOINES State IA Zip Code 50304

FEC Identification Number

C C00230482

Transaction ID : SB23.I32691

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

Category/Type

Candidate Name

GRASSLEY, CHARLES, E, ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: IA District:

Memo Item

Full Name (Last, First, Middle Initial)
C. RAND PAUL FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2021

Mailing Address PO BOX 72928

City NEWPORT State KY Zip Code 41072

FEC Identification Number

C C00496075

Transaction ID : SB23.I32696

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

Category/Type

Candidate Name

PAUL, RAND, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: KY District:

Memo Item

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

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

15000.00

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 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)
Reclaim America PAC

Full Name (Last, First, Middle Initial)
A. RAND PAUL FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		29		2021

Mailing Address PO BOX 72928

City NEWPORT State KY Zip Code 41072

FEC Identification Number

C C00496075

Purpose of Disbursement
CONTRIBUTION

Transaction ID : SB23.I32697

Amount of Each Disbursement this Period

5000.00

Candidate Name

PAUL, RAND, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Memo Item

State: KY District:

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

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify)

Memo Item

State: District:

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

Date of Disbursement

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

Mailing Address

City State Zip Code

FEC Identification Number

C

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

5000.00

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

20000.00