PAGE 1 / 41

Image# 202101139398670580

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For	Other Than	An Authorized	d Commi	ttee		Office Use Onl	y
NAME OF COMMITTEE (in f		E OR PRINT ▼		ample: If typer the lines.		12FE4M	5	
ASSOCIATION	FOR EME	RGENCY	RESPONDE	RS AND	FIREFIG	HTERS		
ADDRESS (number and		2 N. WATER ST	TREET STE 600					
Check if different than previous reported. (AC	ly . M	IILWAUKEE				WI	53202	
2. FEC IDENTIFICA	TION NUMB	ER ▼	CITY 🛦			STATE A	ZIP (CODE A
C C00622472			3. IS THIS REPORT		NEW (N) OR	x AM (A)	IENDED	
4. TYPE OF REP (Choose One) (a) Quarterly Repo	- (b) Monthly Report Due On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	ij	May 20 (M5) Jun 20 (M6) Jul 20 (M7)	Sep	20 (M8) 20 (M9) 20 (M10)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE)
July 15 Quarterly October 1	Report (Q3)	(c) 12-Day PRE-Ele Report	for the:	Primary (12 Convention		General (12S)	
July 31 M Report (N Year Only	Ion-election	(d) 30-Day POST-E Report		General (3	0G) / 06 /	Runoff (3	OR) in the State	Special (30S)
5. Covering Period	10	18 / Y	2018	through	M = M 11	26	2018	Y
I certify that I have exact Type or Print Name of	Р	eport and to the iaro, Robert, , ,	e best of my kno	wledge and	d belief it is tr	ue, correct and	d complete.	
Signature of Treasurer	Piaro, Rob	ert, , ,		[Electronica	ully Filed] [Date 01	13	2021
NOTE: Submission of fa	ilse, erroneous,	or incomplete i	nformation may s	ubject the po	erson signing t	his Report to th	ne penalties of	52 U.S.C. § 3010
Office Use								DRM 3X 5/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS.

		COLUMN A This Period	COLUMN B Calendar Year-to-Date				
3.	(a) Cash on Hand January 1, 2018		17488.47				
	(b) Cash on Hand at Beginning of Reporting Period	54789.24					
	(c) Total Receipts (from Line 19)	87456.25	2108132.79				
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	142245.49	2125621.26				
7.	Total Disbursements (from Line 31)	89981.76	2073357.53				
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52263.73	52263.73				
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					

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS

R	eport Covering the Period: From:	18 2018	To: 11 26 2018
	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)	3605.00	63707.99
	(ii) Unitemized(iii) TOTAL (add	83851.25	2044424.80
	Lines 11(a)(i) and (ii)	87456.25	2108132.79
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	87456.25	2108132.79
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
	to Federal Candidates and Other Political Committees	0.00	0.00
	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))▶	87456.25	2108132.79
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	87456.25	2108132.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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89981.76	2073357.53
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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
3. Total Contributions (other than loans) (from Line 11(d), page 3)	87456.25	2108132.79
4. Total Contribution Refunds (from Line 28(d))	485.00	8080.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	86971.25	2100052.79
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	89496.76	2055277.53
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	89496.76	2055277.53

: 97 `A = G7 9 @ @ 5 B9 CIG`H9 LH`F9 @ 5 H98 `HC`5 `F9 DC FHž G7 < 98 I @ 9 `C F` ± H9 A ± N5 H± CB

Form/Schedule: F3XA
Transaction ID:

BEST EFFORTS PROCEDURES - ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS / C006224721. Initial solicitation for a contribution is made via phone call and solicitor additionally states during the solicitation call that as a part of compliance, the PAC is required to inform the contributor that "Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and name of employer of individuals whose contributions exceed \$200 in a calendar year". Following acceptance to provide a contribution, a follow-up invoice letter is mailed to the contributor which includes a clear and conspicuous request for contributor's employer and occupation information to be written in and returned when they mail back their contribution.2. Secondarily, if employer/occupation information was still not provided within the above steps, a follow up phone call would be placed to the contributor within 30 days of receipt of the contribution via a separate pre-addressed post card sent in the US Mail to the contributor, again clearly requesting the name of employer and occupation, without solicitation of a contribution.3. Lastly, the third/final step if employer/occupation information was still not provided, a follow up phone call is placed to the contributor during which the missing information is clearly requested (without solicitation of a contribution) as an FEC compliance requirement 4. The missing employer/occupation information. if/when obtained, will be uploaded and we would subsequently update our reports to include the missing information. In instances where all efforts outlined above fail to obtain this information, the words "unavailable" or "refused" will be uploaded for these fields. In either scenario, the PAC will either file a memo Schedule A with its next regularly scheduled report, listing all contributions for which new contributor information has been received, or file an amendment to the original report.

Form/Schedule: F3XA Transaction ID:

This chain of amendments covering the 2017, 2018, and 2019 years, address both the concerns and requests of the audit, as well as responding and satisfying the RFAI due 1/13/2021. Regarding the Audit, these amendments address Attachment A, Attachment B, and Attachment C Part 2.

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(0	(check only one)									
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	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGE	NCY RESPONDERS AND FIREF	IGHTERS
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 195 SYCAMORE DR		10 23 2018
City	State Zip Code	Transaction ID : SA11AI-8502531
CANTON	GA 30115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	60.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Retired	Retired	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Middle Ini	Date of Receipt	
Mailing Address 4268 PACIFICO LN		11 01 2018
City	State Zip Code	Transaction ID : SA11AI-8503719
LAS VEGAS	NV 89135	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Ini	tial) or Full Organization Name	Date of Receipt
Mailing Address 3620 GIDDINGS RANCH RD		10 24 2018
City	State Zip Code	Transaction ID : SA11AI-8502625
ALTADENA	CA 91001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)	>	310.00
TOTAL This Period (last page this line number	only)	

	1 OIT LINE HOMBLIN					PAGE	=	8	OF		41
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	s and Statements may not be sold or used by any persions the name and address of any political committee to	
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EME	RGENCY RESPONDERS AND FIREF	IGHTERS
CONN, WALTER, , ,	iddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 3620 GIDDINGS RAN	ICH RD	10 29 2018
City	State Zip Code	Transaction ID : SA11AI-8503519
ALTADENA	CA 91001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Mi FERNANDES, CARLOS M, , Mailing Address 1005 LOUISA ST	iddle Initial) or Full Organization Name	Date of Receipt
		11 21 2018
City	State Zip Code	Transaction ID : SA11AI-8505951
ELIZABETH	NJ 07201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer (for Individual) BERTO CONSTRUCTION	Occupation (for Individual) Best Efforts	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	225.00	
Full Name of Individual (Last, First, Mi	iddle Initial) or Full Organization Name	Date of Receipt
Mailing Address 1875 JEWELL CT		10 22 2018
City STOCKTON	State Zip Code CA 95203	Transaction ID : SA11AI-8501737 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer (for Individual) SKANSKA CONSTRUCTIONS	Occupation (for Individual) SUPERINTENDENT	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	350.00	
SUBTOTAL of Receipts This Page (option	onal)	325.00
TOTAL This Period (last page this line r	number only)	

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Any information copied from such Reports and or for commercial purposes, other than using t						
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERG	ENCY RESF	PONDERS AND FIRE	FIGHTERS			
Full Name of Individual (Last, First, Middle FRIEDL, TERRY, , , Mailing Address 1875 JEWELL CT	Initial) or Full Org	anization Name	Date of Receipt			
City	State	Zip Code	11 12 2018 Transaction ID : SA11AI-8504867			
STOCKTON	CA	95203	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		75.00			
Name of Employer (for Individual) Contruction Superintendant		ation (for Individual) SKA CONSTRUCTIONS	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 350.00				
Full Name of Individual (Last, First, Middle HAMBLET, SUSAN H, , , Mailing Address 119 DAVIS AVE SW	Initial) or Full Org	Date of Receipt				
			10 23 2018			
City LEESBURG	State VA	Zip Code 20175	Transaction ID : SA11AI-8502489 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	, and the second					
Name of Employer (for Individual) Retired	Occup Retire	ation (for Individual) d	Memo Item			
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 400.00				
Full Name of Individual (Last, First, Middle HARDERS, RANDY, , ,	Initial) or Full Org	anization Name	Date of Receipt			
Mailing Address 10612 W 13TH ST			10 22 / 2018			
City WOOD RIVER	State NE	Zip Code 68883	Transaction ID : SA11AI-8502197 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period			
Name of Employer (for Individual) HARDERS LIVESTOCK		ation (for Individual) K DRIVER	Memo Item			
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 400.00				
SUBTOTAL of Receipts This Page (optional).		>	475.00			
TOTAL This Period (last page this line number	er only)					

					PAGE	 10	OF	41		
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NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGE	NCY RESPONDERS AND FIREF	GHTERS
Full Name of Individual (Last, First, Middle Init	ial) or Full Organization Name	Date of Receipt
Mailing Address 929 IDAHO AVE W		10 20 2018
City	State Zip Code	Transaction ID : SA11AI-8500917
SAINT PAUL	MN 55117	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Retired	Retired	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	33 13	
Other (specify) ▼	250.00	
Full Name of Individual (Last, First, Middle Init HUR, MARY JANE, , ,	ial) or Full Organization Name	Date of Receipt
Mailing Address 62 EAGLE CT		10 29 2018
City	State Zip Code	
THE WOODLANDS	TX 77380	Transaction ID : SA11AI-8502961 Amount of Each Receipt this Period
		Amount of Each recorpt this remod
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	235.00	
Full Name of Individual (Last, First, Middle Init	ial) or Full Organization Name	Date of Receipt
Mailing Address PO BOX 545		11 17 2018
City	State Zip Code	Transaction ID : SA11AI-8505401
BRYSON CITY	NC 28713	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	riggiogato roal to Date	
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		285.00
TOTAL This Period (last page this line number of	only)	

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		13		14		15	16		17	

	Statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGE	ENCY RESPONDERS AND FIREF	IGHTERS
Full Name of Individual (Last, First, Middle In JADHAD, UMESH, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 8785 PETITE CREEK DR		11 20 / Y Y Y Y Y Y
City ROSEVILLE	State Zip Code CA 95661	Transaction ID : SA11AI-8505921
	30001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Deloitte Consulting	Managing Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	550.00	
Full Name of Individual (Last, First, Middle In KAMRAVA, Dr. David S., , ,	iitial) or Full Organization Name	Date of Receipt
Mailing Address 7320 WOODLAKE AVE		10 29 2018
STE 290 City	State Zip Code	Transaction ID : SA11AI-8503533
WEST HILLS	CA 91307	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer (for Individual) Encino Hospital Medical Center	Occupation (for Individual) Pulmonology / General Pulmonary	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name of Individual (Last, First, Middle In KHALIL, RAMSIS, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 191 MAPLE ST APT 8D		10 22 2018
City LAWRENCE	State Zip Code MA 01841	Transaction ID : SA11AI-8501175 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer (for Individual) BOSTON PUBLIC SCHOOLS	Occupation (for Individual) PART TIME TEACHER	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify)	300.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	500.00
TOTAL This Period (last page this line number	only)	

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

FOR LINE NUMBER:						PAGE	 12	OF	41	
(check only one)										
	X	11a		11b		11c	12			
		13		14		15	16		17	

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) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KHALIL, RAMSIS, , , Date of Receipt Mailing Address 191 MAPLE ST APT 8D 2018 City State Zip Code Transaction ID: SA11AI-8503537 MA **LAWRENCE** 01841 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **BOSTON PUBLIC SCHOOLS** PART TIME TEACHER Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) В.

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name of Individual (Last, First, Middle In KLINE, MITCHELL S, , ,	iitial) or Full Orga	nization Name	Date of Receipt
Mailing Address 61 NOB HILL RD APT D City NEW LONDON	State CT	Zip Code 06320	10 31 2018 Transaction ID : SA11AI-8503663 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	50.00 Memo Item		
Name of Employer (for Individual) Retired	Retired	ition (for Individual)	Welle lell
Receipt For: Primary General Other (specify) ▼			
Full Name of Individual (Last, First, Middle In	Date of Descript		

LEACH JR, LAWRENCE, , , Date of Receipt Mailing Address 1233 E WALDBURG ST 10 24 2018 City State Zip Code Transaction ID: SA11AI-8502641 GΑ SAVANNAH 31404 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

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

7

7

300.00

						PAGE	 13	OF	41	
(check only one)										
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		13		14		15	16		17	

	nd Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERO	GENCY RESPONDERS AND FIRE	FIGHTERS
Full Name of Individual (Last, First, Middle	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 11 BAYBERRY LN		10 23 / Y Y Y Y Y Y
City	State Zip Code	Transaction ID : SA11AI-8502517
NORWELL	MA 02061	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	110.00
Name of Employer (for Individual)	Occupation (for Individual)	Memo Item
Retired	Retired	_
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	0.0	
Other (specify) ▼	210.00	
Full Name of Individual (Last, First, Middle MORRIS-BECK, MONTEEN, , ,	· · ·	Date of Receipt
Mailing Address 2425 HICKORY TREE RD)	11 26 2018
City	State Zip Code	Transaction ID : SA11AI-8506353
SAINT CLOUD	FL 34772	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	700.00	
Full Name of Individual (Last, First, Middle MOSES, CATHY S, , ,	e Initial) or Full Organization Name	Date of Receipt
Mailing Address 798 SW MAIN BLVD		11 26 2018
City	State Zip Code	Transaction ID : SA11AI-8506355
LAKE CITY	FL 32025	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	130.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify)	240.00	
SUBTOTAL of Receipts This Page (optional)	440.00
TOTAL This Period (last page this line num	ber only)	
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							PAGE	_ ′	14	OF		41
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			13		14		15		16			17

Any information copied from such Reports ar or for commercial purposes, other than using			rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERO	GENCY RESPO	NDERS AND FIRE	FIGHTERS
Full Name of Individual (Last, First, Middle OBENCHAIN, ALICE M., , ,	e Initial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 122 SAVANNAH CT			10 23 2018
City		ip Code	Transaction ID : SA11AI-8502477
DALEVILLE	VA	24083	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer (for Individual) AVERETT UNIVERSITY	Occupation PROFESS	n (for Individual) SOR	Memo Item
Receipt For: Primary General Other (specify) ▼	Aggregate Year-t	o-Date ▼ 650.00	
Full Name of Individual (Last, First, Middle OWENS, BRITTON, , , Mailing Address 432 PRIVATE ROAD 3090	,	ation Name	Date of Receipt
			11 26 2018
City		ip Code	Transaction ID : SA11AI-8506373
LAMPASAS	TX	76550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		170.00
Name of Employer (for Individual) heavy track veachile mechanic	Occupation CONTRAC	n (for Individual) CTER	Memo Item
Receipt For:	Aggregate Year-t	o-Date ▼	
Primary General Other (specify) ▼	4	230.00	
Full Name of Individual (Last, First, Middle	e Initial) or Full Organiz	ation Name	Date of Receipt
Mailing Address 2011 FAIRVIEW RD APT 210			11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City RALEIGH		ip Code 27608	Transaction ID : SA11AI-8503761
FEC ID number of contributing			Amount of Each Receipt this Period
federal political committee.	C		300.00
Name of Employer (for Individual) Retired	Occupation Retired	n (for Individual)	Memo Item
Receipt For: Primary General	Aggregate Year-t	o-Date ▼	
Primary General Other (specify)		800.00	
SUBTOTAL of Receipts This Page (optional)	>	820.00
TOTAL This Period (last page this line num	ber only)		

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

FOR LINE NUMBER:							PAGE	 15	OF	4	1
	(check only one)										
		X	11a		11b		11c	12			
			13		14		15	16		1	7

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) ASSOCIATION FOR EMERGENCY RESPONDERS AND FIREFIGHTERS Full Name of Individual (Last, First, Middle Initial) or Full Organization Name SIMPSON, KRISTEN, , , Date of Receipt Mailing Address 2110 LINDA DALE 17 2018 City Zip Code State Transaction ID: SA11AI-8505423 TX **HOUSTON** 77077 Amount of Each Receipt this Period FEC ID number of contributing C 150.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **CAR RIGS CPA** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 3605.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 16 OF 41			
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)			
	Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Stater	monte may not be cold or used					
or for commercial purposes, other than using the nan	ne and address of any political	committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)						
angle ASSOCIATION FOR EMERGENC	Y RESPONDERS AN	ID FIREF	GHTERS			
Full Name (Last, First, Middle Initial)						
4. Hammen, Michelle, , ,			Date of Disbursement			
Mailing Address W4960 Kohler Drive			10 19 2018			
City Fredonia	State Zip Code 53021		FEC Identification Number			
Purpose of Disbursement	00021		C			
payroll		001	Transaction ID : SB21B-83655			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:	Туре	209.06			
Senate	Primary General		Deid in a small as an ann NaiD			
President	Other (specify) ▼		Paid via payroll company NatPa			
State: District:						
Full Name (Last, First, Middle Initial)			Date of Disbursement			
3. Hammen, Michelle, , ,			M M / D D / Y Y Y			
Mailing Address W4960 Kohler Drive			10 26 2018			
,	State Zip Code		FEC Identification Number			
Fredonia Purpose of Disbursement	WI 53021					
payroll		001	C			
Candidate Name	-	Category/	Transaction ID : SB21B-83661 Amount of Each Disbursement this Period			
		Type	1000			
Office Sought: House Disburser			209.07			
Senate President	Other (specify) General		Paid via payroll company NatP			
State: District:	Other (specify)		X Memo Item			
Full Name (Last, First, Middle Initial)						
Piaro, Robert, , ,			Date of Disbursement			
Mailing Address 8444 County Road M			10 19 2018			
·						
,	State Zip Code		FEC Identification Number			
Fredonia Purpose of Disbursement	WI 53021					
payroll		001	Transaction ID : SB21B-83653			
Candidate Name		Category/	Amount of Each Disbursement this Period			
Office Sought: House Disburser	ment For:	Туре	535.08			
Senate Stugitt.	Primary General					
President	Other (specify) ▼		Paid via payroll company NatP X Memo Item			
State: District:			Wellio Itelli			
	·		2.00			
SUBTOTAL of Disbursements This Page (optional)		·····•	0.00			
TOTAL This Period (last page this line number only)						

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only	one) 22 23 26 27
Any information copied from such Reports and Statem			
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY			
Full Name (Last, First, Middle Initial) A. Piaro, Robert, , , Mailing Address 8444 County Road M			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fredonia Purpose of Disbursement	State Zip Code WI 53021		FEC Identification Number
payroll Candidate Name		001 Category/ Type	Transaction ID: SB21B-83659 Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼		535.08 Paid via payroll company NatPay ★ Memo Item
Full Name (Last, First, Middle Initial) 3. Piaro, Robert, , , Mailing Address 8444 County Road M			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Fredonia Purpose of Disbursement payroll	State Zip Code WI 53021	001	FEC Identification Number C Transaction ID: SB21B-83665
		Category/ Type	Amount of Each Disbursement this Period 535.09 Paid via payroll company NatPa
Full Name (Last, First, Middle Initial) C. Piaro, Robert, , , Mailing Address 8444 County Road M			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fredonia Purpose of Disbursement payroll Candidate Name	State Zip Code WI 53021	001 Category/ Type	FEC Identification Number C Transaction ID: SB21B-83671 Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼	.,,,,	535.07 Paid via payroll company NatPa Memo Item
SUBTOTAL of Disbursements This Page (optional)			0.00
TOTAL This Period (last page this line number only)			, , , , , , , , , , , , , , , , , , , ,

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE (check only	
	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENC	•		
Full Name (Last, First, Middle Initial) A. Piaro, Robert, , ,			Date of Disbursement
Mailing Address 8444 County Road M			11 16 2018
Fredonia	State Zip Code WI 53021		FEC Identification Number
Purpose of Disbursement payroll Candidate Name		001 Category/	Transaction ID : SB21B-83677 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼	Type	535.09 Paid via payroll company NatPa Memo Item
State: District: Full Name (Last, First, Middle Initial) B. Piaro, Robert, , , Mailing Address 8444 County Road M			Date of Disbursement 11 23 2018
	State Zip Code WI 53021		FEC Identification Number
Purpose of Disbursement payroll Candidate Name		001 Category/	Transaction ID : SB21B-83683 Amount of Each Disbursement this Period
Office Sought: House Disburser	ment For: Primary General Other (specify)	Туре	535.08 Paid via payroll company NatPa Memo Item
Full Name (Last, First, Middle Initial) C. Stetler, Melissa, , ,			Date of Disbursement
Mailing Address 520 Random Lake Rd. Apt 303			10 19 2018
City Random Lake Purpose of Disbursement payroll	State Zip Code WI 53075	001	FEC Identification Number
Candidate Name		Category/ Type	Transaction ID: SB21B-83657 Amount of Each Disbursement this Period
Office Sought: House Disburser	ment For: Primary General Other (specify) ▼	,,	Paid via payroll company NatPa Memo Item
SUBTOTAL of Disbursements This Page (optional)			0.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 OF (check only one) X 21b 22 23 26 27 28a 28b 28c 29 30b			
Any information copied from such Reports and Stater or for commercial purposes, other than using the name		by any perso	on for the purpose of soliciting contributions		
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENC					
Full Name (Last, First, Middle Initial) Stetler, Melissa, , , Mailing Address 520 Random Lake Rd.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Apt 303 City	State Zip Code				
Random Lake	WI 53075		FEC Identification Number		
Purpose of Disbursement payroll Candidate Name		001 Category/	Transaction ID : SB21B-83663 Amount of Each Disbursement this Period		
Office Sought: House Disburser		Type	Paid via payroll company NatPay Memo Item		
Full Name (Last, First, Middle Initial) Stetler, Melissa, , , Mailing Address, 550 Beauty Letter Bd.			Date of Disbursement		
Mailing Address 520 Random Lake Rd. Apt 303			11 02 2018		
City Random Lake Purpose of Disbursement payroll Candidate Name	State Zip Code 53075	001 Category/	FEC Identification Number C Transaction ID: SB21B-83669 Amount of Each Disbursement this Period		
Office Sought: House Senate President State: Disburser Senate President	ment For: Primary General Other (specify)	Туре	192.33 Paid via payroll company NatPa Memo Item		
Full Name (Last, First, Middle Initial) Stetler, Melissa, , ,			Date of Disbursement		
Mailing Address 520 Random Lake Rd. Apt 303			11 02 2018		
City Random Lake Purpose of Disbursement payroll Candidate Name	State Zip Code WI 53075	001 Category/	FEC Identification Number C Transaction ID: SB21B-83667 Amount of Each Disbursement this Period		
Office Sought: House Disburser	ment For: Primary General Other (specify) ▼	Type	209.06 Paid via payroll company NatPa Memo Item		
SUBTOTAL of Disbursements This Page (optional)			0.00		
TOTAL This Period (last page this line number only)					

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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 4 (check only one) X 21b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY	ne and address of any political	committee to	solicit contributions from such committee.		
Full Name (Last, First, Middle Initial) A. Stetler, Melissa, , , Mailing Address 520 Random Lake Rd. Apt 303			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
<u> </u>	State Zip Code 53075	001 Category/	FEC Identification Number C Transaction ID: SB21B-83675 Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify)	Туре	Paid via payroll company NatPa Memo Item		
Full Name (Last, First, Middle Initial) B. Stetler, Melissa, , , Mailing Address 520 Random Lake Rd. Apt 303 City	State Zip Code		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
•	WI 53075	001 Category/ Type	FEC Identification Number C Transaction ID: SB21B-83673 Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify)	Туре	209.08 Paid via payroll company NatPa Memo Item		
Full Name (Last, First, Middle Initial) C. Stetler, Melissa, , , Mailing Address 520 Random Lake Rd. Apt 303			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
•	State Zip Code 53075	001 Category/	FEC Identification Number C Transaction ID: SB21B-8368* Amount of Each Disbursement this Period		
	nent For: Primary General Other (specify) ▼	Туре	192.33 Paid via payroll company NatPa Memo Item		
SUBTOTAL of Disbursements This Page (optional)		············ >	0.00		

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 21 OF 41
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and State	ments may not be sold or use	ed by any perso	on for the purpose of soliciting contributions
or for commercial purposes, other than using the na	me and address of any politica	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
angle ASSOCIATION FOR EMERGENC	Y RESPONDERS AI	ND FIREF	IGHTERS
Full Name (Last, First, Middle Initial)			
Stetler, Melissa, , ,			Date of Disbursement
Mailing Address 520 Random Lake Rd.			11 16 2018
Apt 303	Chaha Zin Cada		
City Random Lake	State Zip Code 53075		FEC Identification Number
Purpose of Disbursement			C
payroll		001	Transaction ID : SB21B-83679
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:	туре	209.06
Senate	Primary General		Paid via payroll company NatPa
President	Other (specify) ▼		Memo Item
State: District: Full Name (Last, First, Middle Initial)			
Stetler, Melissa, , ,			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address 520 Random Lake Rd. Apt 303			11 23 2018
City Random Lake	State Zip Code 53075		FEC Identification Number
Purpose of Disbursement	33073		C
payroll		001	Transaction ID : SB21B-83687
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:	Type	192.33
Senate	Primary General		Paid via payroll company NatPa
President	Other (specify)		Memo Item
State: District:			Wellio Itelli
Full Name (Last, First, Middle Initial)			Date of Disbursement
Stetler, Melissa, , ,			M M / D D / Y Y Y Y
Mailing Address 520 Random Lake Rd.			11 23 2018
Apt 303 City	State Zip Code		
Random Lake	WI 53075		FEC Identification Number
Purpose of Disbursement	1		
payroll		001	Transaction ID : SB21B-8368
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disburse	ment For:	Type	209.06
Senate	Primary General		Paid via payroll company NatPa
President	Other (specify) ▼		Memo Item
State: District:			Wollo Roll
SUBTOTAL of Disbursements This Page (optional).			0.00
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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 22 O		
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		Summary Page	X 21b 28a		23 26 27 28c 29 30b
Any information copied from such Reports and State	amente mov	not be sold or us			
or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full)					
$ \; angle$ ASSOCIATION FOR EMERGEN(CY RESI	PONDERS A	ND FIREF	IGHTERS	
Full Name (Last, First, Middle Initial)					
A. American Technology Services LI	_C			Date of Disb	ursement
	M = M /	D D / Y TY TY			
Mailing Address 125 North 2nd Street Unit 110 Box 241	10	24 2018			
City	State	Zip Code		EEC Idontific	ation Number
Phoenix	AZ	85250			ation Number
Purpose of Disbursement Software/Software Licensing Payment			001	C	
Candidate Name					tion ID : SB21B-83425
-			Category/ Type	AMOUNT OF E	ach Disbursement this Period
	ement For:				8738.88
Senate President	Primary Other (spe	General			
State: District:	Other (spe	ecity) 🔻		Memo Ite	em
Full Name (Last, First, Middle Initial)					
B. American Technology Services Ll	LC			Date of Disb	ursement
				M = M /	D D / Y Y Y Y Y
Mailing Address 125 North 2nd Street Unit 110 Box 241				10	31 2018
City	State	Zip Code		FEC Identific	ation Number
Phoenix Purpose of Disbursement	AZ	85250			
Software/Software Licensing Payment	C ID .00010 00107				
Candidate Name			Category/		tion ID : SB21B-83427 ach Disbursement this Period
0	Туре				
Office Sought: House Disburse Senate	ement For: Primary	General			6846.72
President	Other (spe			п	
State: District:				Memo Ite	em
Full Name (Last, First, Middle Initial)	_				
C. American Technology Services LI	_C			Date of Disb	
Mailing Address 125 North 2nd Street				11	07 2018
Unit 110 Box 241					
City Phoenix	State AZ	Zip Code 85250		FEC Identific	ation Number
Purpose of Disbursement	,,_	00200		C	
Software/Software Licensing Payment			001		tion ID : SB21B-83429
Candidate Name			Category/	Amount of E	ach Disbursement this Period
Office Sought: House Disburs	ement For:		Туре		3569.76
Senate Disbulsement For. Senate Primary General					7 7
President	Other (spe	ecify) 🔻		Memo Ite	em
State: District:					
SURTOTAL of Dichursements This Page (anticast)					19155.36
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	1 1 7	45
TOTAL This Period (last page this line number onl	v)				

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SCHEDULE B (FEC Form 3X)	Har -	make extract 1 ()				PAGE 23 OF 41
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	· — · —	∃] 26
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b
Any information copied from such Reports and Statem	nents mav n	ot be sold or use				
or for commercial purposes, other than using the name	e and addre	ess of any politic	al committee to	solicit contri	butions fro	m such committee.
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENCY	Y RESP	ONDERS A	ND FIREF	FIGHTER	S	
Full Name (Last, First, Middle Initial)						
A. American Technology Services LLC	Date of D	isburseme	/ Y Y Y Y Y			
Mailing Address 125 North 2nd Street Unit 110 Box 241					14	2018
City State Zip Code Phoenix AZ 85250 Purpose of Disbursement					ification N	umber
Software/Software Licensing Payment			001	C		
Candidate Name			Category/ Type			: SB21B-83431 bursement this Period
Office Sought: House Disbursem	nent For:	General	1,450			3640.96
	Other (spec			Memo	Item	
Full Name (Last, First, Middle Initial)						
B. American Technology Services LLC					isburseme	nt
Mailing Address 125 North 2nd Street Unit 110 Box 241				11	21	2018
,	state AZ	Zip Code 85250		FEC Ident	tification N	umber
Purpose of Disbursement Software/Software Licensing Payment	001	С				
Candidate Name						SB21B-83433 bursement this Period
Office Sought: House Disbursem	ent For:		Type		7 5 1 1	2586.88
	Primary	General			,	,
State: President (Other (spec	пу)		Memo	Item	
Full Name (Last, First, Middle Initial) C. Authnet Gateway				Date of D	isburseme	nt
				M M	/ D D	/ Y Y Y Y Y
Mailing Address PO Box 899				11	02	2018
,	state CA	Zip Code		FEC Ident	tification N	umber
San Francisco Purpose of Disbursement	CA	94128				
Credit Card Fee/ Merchant Fee 001					Transaction ID : SB21B-8343	
			Category/ Type	Amount o	Lacii Dis	bursement this Period
Office Sought: House Disbursem	nent For: Primary	General		<u> </u>		176.90
President State: District:	Other (spec	ify) ▼		Memo	Item	
						6404.74
SUBTOTAL of Disbursements This Page (optional)			······		7	0404.74
TOTAL This Period (last page this line number only).						

SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 24 C			
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NAME OF COMMITTEE (In Full)						
$ \; angle$ ASSOCIATION FOR EMERGENC	Y RESI	PONDERS A	ND FIREF	IGHTERS		
Full Name (Last, First, Middle Initial)						
A. Authnet Gateway				Date of Dist	bursement	
	M = M /	D D / Y Y Y Y Y				
Mailing Address PO Box 899				11	02 2018	
City	State	Zip Code				
San Francisco	CA	94128		FEC Identific	cation Number	
Purpose of Disbursement Credit Card Fee/ Merchant Fee				C		
Candidate Name			001	Transac	ction ID : SB21B-83441	
Candidate Name			Category/ Type	Amount of E	Each Disbursement this Period	
Office Sought: House Disburse	ment For:		Турс		30.00	
Senate	Primary	General			7 7	
President	Other (spe	ecify) 🔻		Memo I	tem	
State: District:						
Full Name (Last, First, Middle Initial) B. Blankrome				Date of Dist	bursement	
				M = M / D = D / Y = Y = Y		
Mailing Address 1 Logan Square				11	14 2018	
City	State	Zip Code				
Philadelphia	PA	19103-6998		FEC Identific	cation Number	
Purpose of Disbursement	'22'					
Legal 001 Candidate Name				Transaction ID : SB21B-83443		
Sandidate Hamo			Category/ Type	Amount of E	Each Disbursement this Period	
Office Sought: House Disburse					1249.50	
Senate	Primary General Other (specify)			,	,	
President State: District:		Memo I	tem			
Full Name (Last, First, Middle Initial)						
C. Clearent LLC				Date of Dist	bursement	
Matthew Adalasas 200 Co. d. C. d. C.				M = M /	05 2040	
Mailing Address 222 South Central Suite 700				11	05 2018	
	State	Zip Code		FFC Identific	cation Number	
Clayton Purpose of Disbursement	МО	63105				
Credit Card Fee/ Merchant Fee			001			
Candidate Name			Category/		ction ID: SB21B-83469 Each Disbursement this Period	
			Type			
Office Sought: House Disburse Senate	ment For: Primary	General			1737.70	
President	Other (spe			п		
State: District:				Memo I	tem	
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SUBTOTAL of Disbursements This Page (optional)			·····•		3017.20	
TOTAL This Period (last page this line number only			_			

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use sepa	rate schedule(s)	FOR LINE (check only	
TI LIVIIZED DISBURSEMENTS		category of the Summary Page	21b 28a	22 23 26 27 28b 28c 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full) ASSOCIATION FOR EMERGENC	Y RESP	ONDERS AI	ND FIREF	IGHTERS
Full Name (Last, First, Middle Initial) A. Compliance Consultants I.I.C.		Date of Disbursement		
	M M / D D / Y Y Y Y			
Mailing Address 1345 Jefferson St. #454				10 24 2018
Milwaukee				
Purpose of Disbursement Credit Card Pmt Processing/ Verification			001	Transaction ID : SB21B-83485
Candidate Name			Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General	71.	12403.52
State: District:	Cirioi (opoo			Memo Item
Full Name (Last, First, Middle Initial) B. Compliance Consultants LLC		Date of Disbursement		
Mailing Address 1345 Jefferson St. #454				10 31 2018
City Milwaukee	State WI	Zip Code 53202		FEC Identification Number
Purpose of Disbursement Credit Card Pmt Processing/ Verification				
Candidate Name	Category/ Type			Transaction ID: SB21B-83487 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate President	ment For: Primary Other (spec	General		9718.06
State: District:	Other (spec	ary)		Memo Item
Full Name (Last, First, Middle Initial) C. Compliance Consultants LLC				Date of Disbursement
Mailing Address 1345 Jefferson St. #454				11 07 2018
Milwaukee	State WI	Zip Code 53202		FEC Identification Number
Purpose of Disbursement Credit Card Pmt Processing/ Verification Candidate Name			001 Category/ Type	Transaction ID: SB21B-83489 Amount of Each Disbursement this Period
Office Sought: House Disburser Senate	ment For: Primary	General	Туро	5066.60
President State: District:	Other (spec	eify) ▼		Memo Item
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			<u> </u>	27188.18

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SC	HEDULE B (FEC Form 3X)			FOR LINE	NUMBER: PAGE 26 OF 41
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	information ported from 1.50 in 1.50 in	<u> </u>		28a	28b 28c 29 30b
	information copied from such Reports and State or commercial purposes, other than using the na				
$\overline{}$	IAME OF COMMITTEE (In Full)				
I \	ASSOCIATION FOR EMERGENO	Y RESF	ONDERS A	AND FIREF	FIGHTERS
\angle					
_	Full Name (Last, First, Middle Initial)		Date of Disbursement		
(Compliance Consultants LLC				M M / D D / Y Y Y Y
N	Mailing Address 1345 Jefferson St.	11 14 2018			
-	#454	04-4	7: 0 1		
	City Milwaukee	State WI	Zip Code 53202		FEC Identification Number
F	Purpose of Disbursement		1 33232		C
	Credit Card Pmt Processing/ Verification			001	Transaction ID : SB21B-83491
C	Candidate Name	·		Category/	Amount of Each Disbursement this Period
7	Office Sought: House Disburse	ment For:		Туре	5167.89
	Senate Sought.	Primary	General		
	President	Other (spe			Memo Item
	State: District:	•			L
_	full Name (Last, First, Middle Initial)				Data of Diabura-
В. (Compliance Consultants LLC		Date of Disbursement		
_ N	Mailing Address 1345 Jefferson St.	11 21 2018			
_	#454				
	City Albuquico	State	Zip Code		FEC Identification Number
	Milwaukee Purpose of Disbursement	WI	53202		C
	Credit Card Pmt Processing/ Verification 001 Candidate Name Category/				Transaction ID : SB21B-83493
C					Amount of Each Disbursement this Period
-	Office Cought House			Type	2674.75
(Office Sought: House Disburse Senate	ment For: Primary	General		3671.75
	President	Other (spe			Mama Harr
S	State: District:	1			Memo Item
	full Name (Last, First, Middle Initial)				
C. (ComputerWild Inc				Date of Disbursement
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SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:	PAGE 27 OF 41
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