

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.

To Protect Our Heritage PAC

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period / / through / /

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

Molotsky, Alan, E., ,

Type or Print Name of Treasurer

Signature of Treasurer *Molotsky, Alan, E., ,* [Electronically Filed] Date / /

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

To Protect Our Heritage 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="2020"/>	<input type="text" value="228634.77"/>	<input type="text" value="228634.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="219705.99"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4438.00"/>	<input type="text" value="7681.00"/>
(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="224143.99"/>	<input type="text" value="236315.77"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="15154.94"/>	<input type="text" value="27326.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="208989.05"/>	<input type="text" value="208989.05"/>
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

To Protect Our Heritage 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).....	3600.00	6151.00
(ii) Unitemized	838.00	1530.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4438.00	7681.00
(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)	4438.00	7681.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	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)).....▶	4438.00	7681.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4438.00	7681.00

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	1654.94	6326.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1654.94	6326.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13500.00	21000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	15154.94	27326.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15154.94	27326.72

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)	4438.00	7681.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4438.00	7681.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1654.94	6326.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1654.94	6326.72

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
To Protect Our Heritage PAC

A. Alter, Bradley, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8825 Springfield
 City Skokie State IL Zip Code 60076
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Certified Health Management Occupation (for Individual) Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2020
Transaction ID : SA11AI.8676
 Amount of Each Receipt this Period 600.00
 Memo Item
 www.michaels.com.

B. Berkowitz, Roberta, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3917 Lee Street
 City Skokie State IL Zip Code 60076
 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 ▼ 1200.00

Date of Receipt 02 / 28 / 2020
Transaction ID : SA11AI.8667
 Amount of Each Receipt this Period 1200.00
 Memo Item
 Contribution to our PAC

C. Greenland, Philip, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9449 Avers Ave
 City Evanston State IL Zip Code 60203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Northwestern University Occupation (for Individual) Professor/Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 27 / 2020
Transaction ID : SA11AI.8666
 Amount of Each Receipt this Period 600.00
 Memo Item
 Contribution to our PAC

SUBTOTAL of Receipts This Page (optional).....	2400.00
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 7 OF 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Menis, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 850 Munshow Lane
 City Crystal Lake State IL Zip Code 60014
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Dentist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 02 / 28 / 2020
Transaction ID : SA11AI.8675
 Amount of Each Receipt this Period 600.00
 Memo Item
 Contribution to our PAC

B. Rothke, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7633 N. Arcadia
 City Morton Grove State IL Zip Code 60053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NeuroBehavior & Rehab Network Occupation (for Individual) Neuropsychologist
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 03 / 2020
Transaction ID : SA11AI.8665
 Amount of Each Receipt this Period 600.00
 Memo Item
 Contribution to our PAC

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
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	3600.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)

A. Constant Contact .com

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement
Softward cost for 2020

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 10 / 2020

FEC Identification Number

Transaction ID : SB21B.8673
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Fastsigns Lincolnwood

Mailing Address 3450 W. Devon Ave.

City Lincolnwood State IL Zip Code 60712

Purpose of Disbursement
Balance of cost of sign for PAC

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 04 / 2020

FEC Identification Number

Transaction ID : SB21B.8671
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Merchant Services Credit Processing

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21741

Purpose of Disbursement
Credit card processing fees

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
03 / 05 / 2020

FEC Identification Number

Transaction ID : SB21B.8672
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

A. Molotsky, Alan, E., ,

Full Name (Last, First, Middle Initial)

Mailing Address 3939 W. Greenwood

City Skokie State IL Zip Code 60076

Purpose of Disbursement POstage, paper and envelopes

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 15 / 2020

FEC Identification Number C

Transaction ID : SB21B.8701

Amount of Each Disbursement this Period 317.00

Memo Item

B. Sommer, Marc, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7141 N. Kedzie #516

City Chicago State IL Zip Code 60645

Purpose of Disbursement Printing cost

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 27 / 2020

FEC Identification Number C

Transaction ID : SB21B.8669

Amount of Each Disbursement this Period 29.89

Memo Item

C. Sommer, Marc, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 7141 N. Kedzie #516

City Chicago State IL Zip Code 60645

Purpose of Disbursement Zoom phone softward for board meetings

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 03 / 28 / 2020

FEC Identification Number C

Transaction ID : SB21B.8683

Amount of Each Disbursement this Period 163.39

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	510.28
TOTAL This Period (last page this line number only).....▶	1457.63

**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)
To Protect Our Heritage PAC

A. DAVIDSON, WARREN

Full Name (Last, First, Middle Initial)
Mailing Address 1790 GREENBRIAR DR

City TROY State OH Zip Code 45373

Purpose of Disbursement
Contribution to Campaign Committee

Candidate Name
DAVIDSON, WARREN

Office Sought: House Senate President
State: OH District: 08

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2020

FEC Identification Number: C00600718
Transaction ID : SB23.8690

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. FRIENDS OF HAGEDORN

Full Name (Last, First, Middle Initial)
Mailing Address 11 CIVIC CENTER PLZ STE 007

City MANKATO State MN Zip Code 56001

Purpose of Disbursement
Contribution to election campaign

Candidate Name
FRIENDS OF HAGEDORN

Office Sought: House Senate President
State: MN District: 01

Disbursement For: 2020
 Primary General Other (specify)

Date of Disbursement: 03 / 31 / 2020

FEC Identification Number: C00550707
Transaction ID : SB23.8700

Amount of Each Disbursement this Period: 1000.00

Memo Item

C. JIM BANKS FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 11431

City FORT WAYNE State IN Zip Code 46858

Purpose of Disbursement
Contribution to Campaign Committee

Candidate Name
JIM BANKS FOR CONGRESS, INC.

Office Sought: House Senate President
State: IN District: 03

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2020

FEC Identification Number: C00577999
Transaction ID : SB23.8706

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial) A. JOE WILSON FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020
Mailing Address PO BOX 2145		FEC Identification Number C C00368522 Transaction ID : SB23.8708
City WEST COLUMBIA	State SC	Zip Code 29171
Purpose of Disbursement Contribution to Campaign Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name JOE WILSON FOR CONGRESS		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SC	District: 02	

Full Name (Last, First, Middle Initial) B. LURIA, ELAINE		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020
Mailing Address PO BOX 66191		FEC Identification Number C C00664375 Transaction ID : SB23.8693
City VIRGINIA BEACH	State VA	Zip Code 23466
Purpose of Disbursement Contribution to election campaign		Amount of Each Disbursement this Period 2500.00
Candidate Name LURIA, ELAINE		Category/Type 011
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: VA	District: 02	

Full Name (Last, First, Middle Initial) C. PERDUE FOR SENATE		Date of Disbursement MM / DD / YYYY 03 / 31 / 2020
Mailing Address PO BOX 12077		FEC Identification Number C C00547570 Transaction ID : SB23.8694
City ATLANTA	State GA	Zip Code 30355
Purpose of Disbursement Contribution to election campaign		Amount of Each Disbursement this Period 5000.00
Candidate Name PERDUE FOR SENATE		Category/Type 011
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: GA	District: 11	

SUBTOTAL of Disbursements This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
To Protect Our Heritage PAC

Full Name (Last, First, Middle Initial)

A. SCOTT FITZGERALD FOR CONGRESS

Mailing Address N4692 Maple

City
Juneau

State
WI

Zip Code
53039

Purpose of Disbursement
Contribution to election campaign

011

Category/
Type

Candidate Name

SCOTT FITZGERALD FOR CONGRESS

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: WI District: 05

Date of Disbursement

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

FEC Identification Number

C C00720011

Transaction ID : SB23.8698

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. STEFANIK, ELISE M.

Mailing Address PO BOX 500

City
GLENS FALLS

State
NY

Zip Code
12801

Purpose of Disbursement
Contribution to election campaign

011

Category/
Type

Candidate Name

STEFANIK, ELISE M.

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NY District: 21

Date of Disbursement

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

FEC Identification Number

C C00547893

Transaction ID : SB23.8692

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

2000.00

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

13500.00