

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 OORAH! POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO BOX 1053 BLOOMINGTON IN 47402

2. FEC IDENTIFICATION NUMBER C C00551853 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day Report for the: General, Runoff, Special.

5. Covering Period 11 / 27 / 2018 through 12 / 31 / 2018

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

Signature of Treasurer WUSLICH, JEFF, , , [Electronically Filed] Date 05 / 19 / 2019

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

OORAH! POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		202548.96
(b) Cash on Hand at Beginning of Reporting Period.....	12380.79	
(c) Total Receipts (from Line 19)	57500.00	377752.45
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	69880.79	580301.41
7. Total Disbursements (from Line 31).....	39043.42	549464.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	30837.37	30837.37
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

OORAH! POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 11 / 27 / 2018 To: 12 / 31 / 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).....	7000.00	47500.00
(ii) Unitemized	0.00	25.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7000.00	47525.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	50500.00	266000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	57500.00	313525.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	48444.95
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	782.50
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	15000.00
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)).....▶	57500.00	377752.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	57500.00	377752.45

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	44043.42	272964.04
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	44043.42	272964.04
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 5000.00	269500.00
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	7000.00
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)) ..	39043.42	549464.04
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39043.42	549464.04

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)	57500.00	313525.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	57500.00	313525.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	44043.42	272964.04
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	782.50
38. Net Operating Expenditures (subtract Line 37 from Line 36)	44043.42	272181.54

**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 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)
OORAH! POLITICAL ACTION COMMITTEE

A. MCDANIEL, MALLOY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2407 CAMERON MILLS ROAD
 City ALEXANDRIA State VA Zip Code 22302-7747
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEST FRONT STRATEGIES Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 30 / 2018
Transaction ID : SA11A.40162
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

B. MEHLMAN, BRUCE, P., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6629 LYBROOK CT
 City BETHESDA State MD Zip Code 20817-3029
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MEHLMAN CASTAGNETTI ROSEN & THOMAS Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 19 / 2018
Transaction ID : SA11A.40175
 Amount of Each Receipt this Period 500.00
 Memo Item CONTRIBUTION

C. WESTINE, LEZLEE, HIEGEL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7108 THRASHER RD
 City MCLEAN State VA Zip Code 22101-2013
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PERSONAL CARE PRODUCTS COUNCIL Occupation (for Individual) PRESIDENT & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 19 / 2018
Transaction ID : SA11A.40176
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2000.00
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: PAGE 7 OF 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. POKAGON BAND OF POTAWATOMI INDIANS

Mailing Address 58620 SINK ROAD

City DOWAGIAC State MI Zip Code 49047-9329

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 ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2018

Transaction ID : SA11A.40159

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	7000.00

**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 8 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

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

A. AFLAC PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1932 WYNNTON ROAD

City COLUMBUS	State GA	Zip Code 31999-0001
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FEC ID number of contributing federal political committee. **C** C00034157

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2018

Transaction ID : SA11C.40174

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

B. AIR METHODS CORPORATION PAC - AMPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 4682

City ENGLEWOOD	State CO	Zip Code 80155-4682
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FEC ID number of contributing federal political committee. **C** C00529909

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 02 / 2018

Transaction ID : SA11C.40158

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. ALTRIA GROUP, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVENUE NW
SUITE 400W

City WASHINGTON	State DC	Zip Code 20001-2155
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FEC ID number of contributing federal political committee. **C** C00089136

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2018

Transaction ID : SA11C.40163

Amount of Each Receipt this Period
1500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4500.00
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 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

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

A. AMERICAN DENTAL ASSOCIATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1111 14TH STREET NW
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
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FEC ID number of contributing federal political committee. **C** C00000729

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
12	/	31	/	2018

Transaction ID : SA11C.40213

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

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

Mailing Address PO BOX 365

City WASHINGTON	State DC	Zip Code 20044-0365
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FEC ID number of contributing federal political committee. **C** C00211318

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
12	/	20	/	2018

Transaction ID : SA11C.40178

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

C. FORD MOTOR COMPANY CIVIC ACTION FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 75000

City DETROIT	State MI	Zip Code 48275-0001
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FEC ID number of contributing federal political committee. **C** C00046474

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
12	/	31	/	2018

Transaction ID : SA11C.40182

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7500.00
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 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

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

A. GOOGLE INC. NETPAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVE NW
9TH FLOOR

City WASHINGTON	State DC	Zip Code 20001-1430
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FEC ID number of contributing federal political committee. **C** C00428623

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
12	/	16	/	2018

Transaction ID : SA11C.40165

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

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

Mailing Address 1350 I STREET NW SUITE 1210

City WASHINGTON	State DC	Zip Code 20005-3305
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FEC ID number of contributing federal political committee. **C** C00010983

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2018

Transaction ID : SA11C.40181

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

C. MACANDREWS & FORBES INCORPORATED PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 35 E 62ND STREET

City NEW YORK	State NY	Zip Code 10065-8014
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FEC ID number of contributing federal political committee. **C** C00432856

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
12	/	19	/	2018

Transaction ID : SA11C.40172

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	12000.00
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 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

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

A. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY PAC (MMPAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111-0001
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FEC ID number of contributing federal political committee. **C** C00118943

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
12		16		2018

Transaction ID : SA11C.40164

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

B. MICROSOFT CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 16011 NE 36TH WAY # 97017

City REDMOND	State WA	Zip Code 98052-6301
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FEC ID number of contributing federal political committee. **C** C00227546

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
12		20		2018

Transaction ID : SA11C.40179

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. NATIONAL EMERGENCY MEDICINE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING	State TX	Zip Code 75038-2522
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FEC ID number of contributing federal political committee. **C** C00140061

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		19		2018

Transaction ID : SA11C.40173

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
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 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

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

A. NATIONAL MULTIFAMILY HOUSING COUNCIL PAC - NMHC

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

Mailing Address 1775 EYE ST. NW
SUITE 1100

City WASHINGTON State DC Zip Code 20006-2424

FEC ID number of contributing federal political committee. **C** C00130773

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
12 / 31 / 2018

Transaction ID : SA11C.40180

Amount of Each Receipt this Period
2000.00

Memo Item
CONTRIBUTION

B. PERSONAL CARE PRODUCTS COUNCIL POLITICAL ACTION CO

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

Mailing Address 1620 L STREET NW
SUITE 1200

City WASHINGTON State DC Zip Code 20036-5670

FEC ID number of contributing federal political committee. **C** C00113845

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2018

Transaction ID : SA11C.40177

Amount of Each Receipt this Period
3500.00

Memo Item
CONTRIBUTION

C. THE CATERPILLAR INC. EMPLOYEE PAC

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

Mailing Address 100 NE ADAMS

City PEORIA State IL Zip Code 61629

FEC ID number of contributing federal political committee. **C** C00148031

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
12 / 31 / 2018

Transaction ID : SA11C.40178_B

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	8000.00
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 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

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

A. TWENTY-FIRST CENTURY FOX, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 400 NORTH CAPITOL ST NW

City WASHINGTON	State DC	Zip Code 20001-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00330019

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
12	/	31	/	2018

Transaction ID : SA11C.40184

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UNITEDHEALTH GROUP PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 701 PENNSYLVANIA AVE NW STE 200

City WASHINGTON	State DC	Zip Code 20004-3610
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00274431

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
12	/	31	/	2018

Transaction ID : SA11C.40183

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C.

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

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	50500.00

**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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. AMTRAK

Mailing Address 60 MASSACHUSETTS AVENUE NE

City WASHINGTON State DC Zip Code 20002-4285

Purpose of Disbursement TRAVEL

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 12 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I8471
 Amount of Each Disbursement this Period
 173.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BISTRO CACAO

Mailing Address 320 MASS. AVE, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement FOOD/BEVERAGE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I8487
 Amount of Each Disbursement this Period
 77.90

Memo Item

Full Name (Last, First, Middle Initial)

C. BROGHAMER CONSULTING LLC

Mailing Address 411 WALNUT STREET PMB 300

City GREEN COVE SPRINGS State FL Zip Code 32043-2006

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
12 / 04 / 2018

FEC Identification Number

C
Transaction ID : SB21B.I8463
 Amount of Each Disbursement this Period
 3039.74

Memo Item

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

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

3290.64

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) A. EC CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 12 / 23 / 2018
Mailing Address 526 6TH STREET SE		FEC Identification Number C [] Transaction ID : SB21B.I8476 Amount of Each Disbursement this Period [] 14624.17
City WASHINGTON	State DC	Zip Code 20003-2705
Purpose of Disbursement FINANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. EC CONSULTING, LLC		Date of Disbursement MM / DD / YYYY 12 / 28 / 2018
Mailing Address 526 6TH STREET SE		FEC Identification Number C [] Transaction ID : SB21B.I8489 Amount of Each Disbursement this Period [] 14624.16
City WASHINGTON	State DC	Zip Code 20003-2705
Purpose of Disbursement FINANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. MIGHT AND MAIN, LLC		Date of Disbursement MM / DD / YYYY 12 / 04 / 2018
Mailing Address 1821 E RUBY LANE		FEC Identification Number C [] Transaction ID : SB21B.I8462 Amount of Each Disbursement this Period [] 1000.00
City BLOOMINGTON	State IN	Zip Code 47401-6054
Purpose of Disbursement FINANCE CONSULTING		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 30248.33
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)
OORAH! POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. O'DONNELL AND ASSOCIATES, LTD.

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement COMMUNICATIONS CONSULTING

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 Y
12 / 23 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I8479
Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. RPM ITALIAN

Mailing Address 650 K ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement FOOD/BEVERAGE

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 Y
11 / 30 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I8460
Amount of Each Disbursement this Period

372.95

Memo Item

Full Name (Last, First, Middle Initial)

C. SOCKO STRATEGIES, LLC

Mailing Address 2438 TUNLAW ROAD NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement FINANCE CONSULTING

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 Y
12 / 23 / 2018

FEC Identification Number

C

Transaction ID : SB21B.I8480
Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

5372.95

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)
A. SOCKO STRATEGIES, LLC

Date of Disbursement: / /

Mailing Address: 2438 TUNLAW ROAD NW

City: WASHINGTON State: DC Zip Code: 20007

Purpose of Disbursement: FINANCE CONSULTING

Candidate Name:

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

State: District:

FEC Identification Number:
Transaction ID : SB21B.I8490
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
B. SWEET AND SAVORY CATERING

Date of Disbursement: / /

Mailing Address: 4340 W. 96TH ST SUITE #104

City: INDIANAPOLIS State: IN Zip Code: 46268

Purpose of Disbursement: CATERING

Candidate Name:

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

State: District:

FEC Identification Number:
Transaction ID : SB21B.I8481
Amount of Each Disbursement this Period:
 Memo Item

Full Name (Last, First, Middle Initial)
C. THE MONOCLE RESTAURANT

Date of Disbursement: / /

Mailing Address: 107 D STREET NE

City: WASHINGTON State: DC Zip Code: 20002-5657

Purpose of Disbursement: FOOD/BEVERAGE

Candidate Name:

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

State: District:

FEC Identification Number:
Transaction ID : SB21B.I8488
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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. MCSALLY FOR SENATE INC

Full Name (Last, First, Middle Initial)

Mailing Address 2141 E CAMELBACK ROAD STE 250

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement
VOID: POLITICAL CONTRIBUTION

Candidate Name
MCSALLY, MARTHA, , ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) **RECOUNT**

State: AZ District:

Date of Disbursement: 12 / 17 / 2018

FEC Identification Number: **C** C00666040
Transaction ID : SB23.I8485

Amount of Each Disbursement this Period: - 5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period: -

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: / /

FEC Identification Number: **C**

Amount of Each Disbursement this Period: -

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	- 5000.00
TOTAL This Period (last page this line number only).....▶	- 5000.00