

# 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**  
**STARS AND STRIPES FOREVER PAC**

ADDRESS (number and street) **228 S WASHINGTON STREET**  
**SUITE 115**  
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00635243** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  07 01 2018 through  /  /  07 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.  
SATTERFIELD, DAVID, , ,  
Type or Print Name of Treasurer

Signature of Treasurer SATTERFIELD, DAVID, , , [Electronically Filed] Date  /  /  08 20 2018

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

**STARS AND STRIPES FOREVER 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="2018"/>		48328.07
(b) Cash on Hand at Beginning of Reporting Period.....	151644.30	
(c) Total Receipts (from Line 19) .....	85670.22	599709.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	237314.52	648037.38
7. Total Disbursements (from Line 31).....	85385.84	496108.70
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	151928.68	151928.68
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1730.02	

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

**STARS AND STRIPES FOREVER 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).....	59261.18	371557.62
(ii) Unitemized .....	22614.26	182589.82
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	81875.44	554147.44
(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) .....	81875.44	554147.44
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.).....	3794.78	45561.87
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)).....▶	85670.22	599709.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	85670.22	599709.31

**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 .....	52270.79	284321.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	52270.79	284321.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	33085.05	211439.78
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 .....	30.00	347.00
(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)).....	30.00	347.00
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)) ..	85385.84	496108.70
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	85385.84	496108.70

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	81875.44	554147.44
34. Total Contribution Refunds (from Line 28(d)) .....	30.00	347.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	81845.44	553800.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	52270.79	284321.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	52270.79	284321.92

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

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

FOR LINE NUMBER: PAGE 6 OF 87  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
**STARS AND STRIPES FOREVER PAC**

**A. SHEPHERD, BARRY, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2670 60TH AVE SE  
 City ROCHESTER State MN Zip Code 55904  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 IBM ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 01 / 2018  
**Transaction ID : A1D100CE833AE4A47AD0**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. HILLMAN, TATNALL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 504 W BLEEKER ST  
 City ASPEN State CO Zip Code 81611  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt 07 / 03 / 2018  
**Transaction ID : AA0599E53266F48FEAFA**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. TURNER, CHARLES, D, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 86 SEALS RD  
 City DALLAS State GA Zip Code 30157-6736  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 RETIRED RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A0F2CDA0B317649DCB87**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2085.00  
**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 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. MULLIGAN, JAMES, A, CAPT,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 912 FIVE POINT RD

City VIRGINIA BEACH	State VA	Zip Code 23454-2642
------------------------	-------------	------------------------

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 ▼  
1252.67

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2018

**Transaction ID : A470D7285B9EE4148BE1**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. FRANKLIN, LORA, V, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 37 PEGGY LN

City MUNFORD	State TN	Zip Code 38058-6729
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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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2018

**Transaction ID : A208E56B6F37648B486F**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. SAND, GINNY, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22720 CAVALIER ST

City WOODLAND HILLS	State CA	Zip Code 91364
------------------------	-------------	-------------------

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 ▼  
525.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		05		2018

**Transaction ID : A4816B81A3BB946E9AD7**

Amount of Each Receipt this Period  
75.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. GOOS, JEAN, M, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7840 W PAINE AVE  
 City LAKEWOOD State CO Zip Code 80235-1920  
 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 ▼ 225.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A3D91C25F466D4126ADC**  
 Amount of Each Receipt this Period 225.00  
 Memo Item

**B. WELLS, KEITHA, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3911 APPALACHIAN TRL  
 City KINGWOOD State TX Zip Code 77345-1022  
 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 ▼ 1271.08

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A4A0D7EAF12064F699D7**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. PALMER, DONALD, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4704 CAMBRIDGE CT  
 City LAKE OSWEGO State OR Zip Code 97035-5386  
 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 ▼ 600.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : AF17D011CDCF24340B06**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 87
	<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)  
**STARS AND STRIPES FOREVER PAC**

**A. REYNOLDS, MARY, S, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4200 GLENARM RD  
 City CRESTWOOD State KY Zip Code 40014-8976  
 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 ▼ 420.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : ACA0B0FF952AD4D6BAD!**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**B. ISLAM, ANGE, RAE, MISS,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5584 STATE ROUTE 20A E  
 City WARSAW State NY Zip Code 14569-9302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MOTEL OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : AA64FE801B0DD452D9DB**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. GRESSER, M, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3 CHECKERED FLAG BLVD  
 City SHAKOPEE State MN Zip Code 55379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CONSULTANT  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A8A6C26A8EA2E4BE38F6**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	370.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. COULTER, ROBERT, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3830 S JEFFERSON AVE  
 APT O5  
 City SPRINGFIELD State MO Zip Code 65807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US MARINE CORPS Occupation (for Individual) RET MILITARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 05 / 2018  
**Transaction ID : A9155CDDAA7574CFBBD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. SMITH, S, LEE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1154 HARVEST GLEN DR NW  
 City CLEVELAND State TN Zip Code 37312-6361  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US POSTAL SERVICE Occupation (for Individual) CUSTODIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1325.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : AB61C997B38214E32B91**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. ANDERSON, EILEEN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18837 KRISTIE LN  
 City EDEN PRAIRIE State MN Zip Code 55346  
 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 ▼ 300.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : A0A81EB2D63944B85B91**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 87
	<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	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. TEETS, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
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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 ▼  
345.18

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2018

**Transaction ID : A865896E8C6AB4F23BBA**

Amount of Each Receipt this Period  
110.00

Memo Item

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

Mailing Address 2224 SHEFFIELD DR

City FORT COLLINS	State CO	Zip Code 80526
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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 ▼  
1050.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2018

**Transaction ID : AA85F0BB5114A4559BE8**

Amount of Each Receipt this Period  
200.00

Memo Item

**C. KSIENIEWICH, CHARLES, F, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 215 AVERY AVE

City SYRACUSE	State NY	Zip Code 13204-1827
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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 ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2018

**Transaction ID : A5DCA50AD37F2400B941**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	410.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. EYESTONE, MAYNARD, M, DR., PHD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 E WINGER RD  
 City MEAD State WA Zip Code 99021  
 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 ▼ 750.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : A59990C14EC354BE9B75**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. LARIVÉE, PAUL, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 COMMERCIAL ST UNIT 306B  
 City CONCORD State NH Zip Code 03301  
 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 ▼ 450.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : AAE713B89F03A4D369F1**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ENGELMAN, F, C, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1849 LA BELLEZZA GRV  
 City COLORADO SPRINGS State CO Zip Code 80919  
 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 ▼ 1050.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : A0C85E15041E54952A42**  
 Amount of Each Receipt this Period 750.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	830.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. FORSYTHE, GERALD, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1111 WILLIS AVE  
 City WHEELING State IL Zip Code 60090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INDECK ENERGY SERVICESINC Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 06 / 2018  
**Transaction ID : A512026A634204CE6BD4**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. LANGENBAHN, JANET, K, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 407 N KICKAPOO ST  
 City LINCOLN State IL Zip Code 62656  
 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 ▼ 255.00

Date of Receipt 07 / 07 / 2018  
**Transaction ID : A33F564D1418E4EAFB46**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**C. BROWN, FORREST, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4202 PACES FERRY RD SE  
 City ATLANTA State GA Zip Code 30339  
 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 ▼ 300.00

Date of Receipt 07 / 07 / 2018  
**Transaction ID : AA2D52246B95046BE94B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1135.00  
**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 14 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. ST CLAIR, ANNE, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8900 INGLESIDE FARM LN  
 City MECHANICSVILLE State VA Zip Code 23111-2600  
 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 ▼ 352.00

Date of Receipt 07 / 08 / 2018  
**Transaction ID : AC7AD1BA58F194D3F9CD**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. BRISCOE, FRANCIS, J, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6150 RUSTIC HILLS DR  
 City ROCKLIN State CA Zip Code 95677-3209  
 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 ▼ 500.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A34AE1F1FDDBF4C7C8C6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. LESLIE, WILLIAM, F, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 111 STARFLOWER DR  
 City GRIFFIN State GA Zip Code 30223-5799  
 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 ▼ 1600.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : ACE04856BF1764B06815**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. CRAMER, EUGENE, N, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 BREWSTER WAY  
 City REDLANDS State CA Zip Code 92373  
 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 ▼ 260.05

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A3FA441B03BAE4F40977**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. THUNDER-HAAB, KETURAH, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 436 PINE BRAE DRIVE  
 City ANN ARBOR State MI Zip Code 48105-2723  
 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 ▼ 900.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A6D77F9FCAF3D4AFE83B**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. SMITH, MANIS, J, DR., JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 MCCARVER DR  
 City GADSDEN State AL Zip Code 35901-8921  
 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 ▼ 500.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A3790CAE7B8DD48BC9DC**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	530.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. CONSTANCE, ESTHER, F, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 141 MEADOWLARK DR  
 City TRENTON State NJ Zip Code 08690  
 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 ▼ 450.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AE40BB746B6C3400C885**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WEST, ARVEN, C, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 80 RIDDLER MILL RD NE  
 City FAIRMOUNT State GA Zip Code 30139-3618  
 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 ▼ 280.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AF49D6A000CE242B09A9**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**C. SHAW, JOHN, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 142 W 720TH AVE  
 City FORT SCOTT State KS Zip Code 66701  
 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 ▼ 600.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A564DE62BDA9E4E98B8A**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 240.00  
**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 17 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. BRANDT, JOHN, L, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2129 12TH AVE E

City HIBBING	State MN	Zip Code 55746-1836
-----------------	-------------	------------------------

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 ▼  
310.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A956F82F5467740F4B42**

Amount of Each Receipt this Period  
210.00

Memo Item

**B. PRATT, JOHN, T, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1479 SW SHORELINE DR

City PALM CITY	State FL	Zip Code 34990
-------------------	-------------	-------------------

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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A133DD42F93614413A8B**

Amount of Each Receipt this Period  
2000.00

Memo Item

**C. HUMPHREY, DIANE, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2279 E 250 N

City BLUFFTON	State IN	Zip Code 46714
------------------	-------------	-------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : AB1F8C295191C434396B**

Amount of Each Receipt this Period  
100.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2310.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SIPES, ROBERT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1271 ARLINGTON WAY  
 City BRENTWOOD State CA Zip Code 94513  
 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 ▼ 525.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A0EBD11A884FF4D8080F**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. SYNNESTVEDT, ANNE, T, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 550  
 City BRYN ATHYN State PA Zip Code 19009-0334  
 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 ▼ 1000.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A3F5DAE05ACE34C3CBEA**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. WHITACRE, CAROL, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 810 W NORMAN ST  
 City BROKEN ARROW State OK Zip Code 74012  
 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 ▼ 300.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A450792F2665B4A628C2**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 1275.00  
**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 19 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. PORTER, HOWARD, F, MR, III**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 392  
 City GASTON State NC Zip Code 27832-0392  
 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 ▼ 550.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AB80294C5E17249B581D**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. BUTSCHEK, MATTHEW, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1755 FM 1378  
 City WYLIE State TX Zip Code 75098  
 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 ▼ 400.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A40D90025F7E04295B0E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BRAUN, JOHN, R, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6 JUXON CT  
 City BALTIMORE State MD Zip Code 21236  
 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 ▼ 1450.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A6579453751294917AD0**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. KELTON, EUGENE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2312 AMHERST ST

City FORT COLLINS	State CO	Zip Code 80525-1826
----------------------	-------------	------------------------

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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A0397148A1A134861927**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. MAHLBURG, WILLIAM, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2050 LARKWOOD CT

City THE VILLAGES	State FL	Zip Code 32162
----------------------	-------------	-------------------

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 ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A6D0A3805078A49A9967**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. BOOTH, ROBERT, V D, MR, JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 930 ASHFORD DR

City SAN ANGELO	State TX	Zip Code 76901-5339
--------------------	-------------	------------------------

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 ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2018

**Transaction ID : A1370F61FC02A4D0287E**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. RIES, MELVIN, A, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3585 ROUND BARN BLVD  
APT 329

City SANTA ROSA State CA Zip Code 95403-0145

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 ▼  
1150.00

Date of Receipt  
07 / 09 / 2018  
Transaction ID : A07EBFD9C00334BD29C1

Amount of Each Receipt this Period  
300.00

Memo Item

**B. HOLTON, LEYLA, G, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10288 IRON ORE RD

City CONROE State TX Zip Code 77303-2410

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 ▼  
700.00

Date of Receipt  
07 / 09 / 2018  
Transaction ID : A0776F7D3A47344B6973

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 13551 BASTIAN RD

City HINCKLEY State IL Zip Code 60520-6003

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 ▼  
250.00

Date of Receipt  
07 / 09 / 2018  
Transaction ID : AF9D99A546FB141FBABE

Amount of Each Receipt this Period  
45.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	445.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<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)  
**STARS AND STRIPES FOREVER PAC**

**A. KOCH, HARRY, A, MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1302 S 101ST ST  
 APT 310  
 City OMAHA State NE Zip Code 68124-1084  
 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 ▼ 600.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AC7486AAA390D4D6187F**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. BARRY, THOMAS, C, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 604 MOUNT OLYMPUS BLVD  
 City NEW SMYRNA BEACH State FL Zip Code 32166-2416  
 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 ▼ 400.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A5292FFFEFDAD048B6877**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SIMPSON, WILLIAM, E, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11530 HERRICK LN  
 City LOUISVILLE State KY Zip Code 40243-1375  
 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 ▼ 350.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A4DF06CBE9E8F4682A03**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. ESTES, CONSTANCE, L, MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5434 E LINCOLN DR  
APT 44

City PARADISE VALLEY State AZ Zip Code 85253-4118

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 ▼  
3000.00

Date of Receipt  
07 / 09 / 2018  
**Transaction ID : A0CB98F6381F447E89AA**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B. VIVIAN, THOMAS, L, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 MUSCONETCONG RIVER RD

City HAMPTON State NJ Zip Code 08827

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 ▼  
250.00

Date of Receipt  
07 / 09 / 2018  
**Transaction ID : A6BB0265BF7A749CFAA4**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. DOUGLASS, DONALD, J, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8961 LAKE DR  
APT 306

City CAPE CANAVERAL State FL Zip Code 32920-5507

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 ▼  
700.00

Date of Receipt  
07 / 09 / 2018  
**Transaction ID : ACEE3CD8BFA644D75BB6**

Amount of Each Receipt this Period  
200.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1300.00

**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 24 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SMALLEY, SYLVIA, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 KATHERINE DR  
 City WARREN State NJ Zip Code 07059-7011  
 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 ▼ 255.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AD0D0822BE6C440AC89A**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**B. HASSING, GORDON, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 KILLDEER LN  
 City HILTON HEAD State SC Zip Code 29928-5621  
 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 ▼ 400.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A072D80B194B444E9ABB**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. SEBASTIAN, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11852 YOUNGER CT  
 City AZLE State TX Zip Code 76020  
 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 ▼ 300.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A1CDB1B529A534475B1F**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 265.00  
**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 25 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SEMLER, SHIRLEY, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1053 CHAMBERS RD  
 City HORSEHEADS State NY Zip Code 14845-8948  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NOT EMPLOYED Occupation (for Individual) CAREGIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 975.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A7E3B99C3CE404BEDB32**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**B. TESCH, JOHN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 17956 GARDEN LN APT 22  
 City HAGERSTOWN State MD Zip Code 21740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DEDICATED LOGISTICS Occupation (for Individual) TRUCK DRIVER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AE7F5134079F1459CB1A**  
 Amount of Each Receipt this Period 20.00  
 Memo Item

**C. CULPEPPER, ROBERT, C, DR., MD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 525 PARK PLACE DR  
 City ALEXANDRIA State LA Zip Code 71301-3947  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) PREMIER PEDIATRIC CLINIC Occupation (for Individual) PEDIATRICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2750.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A9C4E602B335B486286F**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2720.00  
**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 26 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. KERSTE, C, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 35971 N HIGHWAY 13  
 City CRAIG State CO Zip Code 81625-7951  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AA681116E585547C8993**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**B. COULTER, ROBERT, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3830 S JEFFERSON AVE APT O5  
 City SPRINGFIELD State MO Zip Code 65807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) US MARINE CORPS Occupation (for Individual) RET MILITARY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AD8ECB4791C524B8195B**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. SCHLECHT, MICHAEL, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 105 E ROKIWAN RD  
 City JAMESTOWN State ND Zip Code 58401-7601  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : ABCC6B6689E0F485CBFE**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	375.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. HARRIS, STUART, I, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2851 SEMINOLE ST  
 City MIAMI State FL Zip Code 33133  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) S RESEARCH Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : AD393EB9D7B924261BE9**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. BROWN, ROY, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 56863 COUNTY ROAD 258  
 City OKEENE State OK Zip Code 73763  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A41349BE850F84D72820**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DUNN, WILLIAM, V, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 41964 ELSMERE RD  
 City AINSWORTH State NE Zip Code 69210-1752  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER- RANCHER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : ADB9189BFCFB545E5A67**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. EATON, ROBERT, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11721 E BLUE WASH RD  
 City CAVE CREEK State AZ Zip Code 85331  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2018  
**Transaction ID : A811A448C99EC4833865**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MEHRER, MORRIS, B, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18622 SE 122ND ST  
 City ISSAQUAH State WA Zip Code 98027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) JOSEPH S. JEFFERSON & SON INC. Occupation (for Individual) CONTRACTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 8000.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : AAAE1515C7B874B3FA42**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**C. RODRIGUEZ, N, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 698 EATON ST  
 City MEMPHIS State TN Zip Code 38120  
 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 ▼ 3100.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : A0084EEB4C40B4CC4854**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. HRABAL, JERRY, R, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4740 NW GLENCOE RD  
 City HILLSBORO State OR Zip Code 97124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 350.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : A898E5B3C36A349B09E0**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. MYERS, JANET, E, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 S GRANT ST  
 City WAYNESBORO State PA Zip Code 17268-1516  
 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 225.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : A14A9741F9BBB44DF828**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ROSEMA, CARL, E, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10934 PORTAGE RD  
 City PORTAGE State MI Zip Code 49002-7309  
 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 600.00

Date of Receipt 07 / 10 / 2018  
**Transaction ID : A1DE0D2ECAC1649E291F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. GORE, THOMAS, P, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 208 TWIN LKS S  
 City CLINTON State MS Zip Code 39056-6155  
 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 ▼ 250.00

Date of Receipt **07 / 10 / 2018**  
**Transaction ID : AC044E9EEF49A4673A26**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. RITSCH, SHEILA, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 805 SAVANNAH WAY  
 City PARADISE State CA Zip Code 95969  
 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 ▼ 2000.00

Date of Receipt **07 / 10 / 2018**  
**Transaction ID : A0A493216864B492B97A**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. ALTON, DUANE, , MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 712 N LANCASHIRE LN  
 City LIBERTY LAKE State WA Zip Code 99019-8531  
 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 ▼ 1750.00

Date of Receipt **07 / 10 / 2018**  
**Transaction ID : AF4F886C5FAC6463C93D**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

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

Mailing Address **201 COLLEGE PL  
APT 413**

City **NORFOLK** State **VA** Zip Code **23510**

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 ▼ **750.00**

Date of Receipt **07 / 12 / 2018**

**Transaction ID : A7DCA77C608294319873**

Amount of Each Receipt this Period **200.00**

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**YOUNG, WILLIAM, M, , JR**

Mailing Address **625 COUNTRY CLUB RD**

City **CAMP HILL** State **PA** Zip Code **17011**

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 ▼ **400.00**

Date of Receipt **07 / 12 / 2018**

**Transaction ID : A001DEF94FB334A05916**

Amount of Each Receipt this Period **100.00**

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**GRUNANDER, ALICE, GAE, ,**

Mailing Address **536 S 1600 E**

City **SPANISH FORK** State **UT** Zip Code **84660**

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 ▼ **500.00**

Date of Receipt **07 / 12 / 2018**

**Transaction ID : A18AB4CA4F9F1489485B**

Amount of Each Receipt this Period **500.00**

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **800.00**

**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 32 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. WOLLRAB, FRED, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 107 HILLTOP RD  
 City BLOOMINGTON State IL Zip Code 61701  
 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 ▼ 745.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A889FC91DD5344533828**  
 Amount of Each Receipt this Period 35.00  
 Memo Item

**B. BRITTON, LYNDIA, R, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9913 LAKE SHORE BLVD  
 City CLEVELAND State OH Zip Code 44108-1052  
 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 ▼ 57000.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A05D2A85A63FD4ED6BD6**  
 Amount of Each Receipt this Period 15000.00  
 Memo Item

**C. WILSON, ROBERT, I, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 9275  
 City PEORIA State IL Zip Code 61612-9275  
 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 ▼ 2000.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : AB92E775A033445A18F6**  
 Amount of Each Receipt this Period 600.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 15635.00  
**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 33 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. HINES, JAMES, O, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 83

City BRACEY State VA Zip Code 23919-0083

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 ▼ 313.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A3D1A11CEC6244639875**

Amount of Each Receipt this Period 63.00

Memo Item

**B. BLENIS, BARRY, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 80 WILLOWBROOK RD

City SURPRISE State NY Zip Code 12176-2301

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

Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : AD8C5788CA2384EE49E7**

Amount of Each Receipt this Period 1000.00

Memo Item

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

Mailing Address 167 RUBY RIDGE AVE

City HENDERSON State NV Zip Code 89002

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

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

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 208.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A9B166D3DC5424CBBBEE**

Amount of Each Receipt this Period 78.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1141.00

**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 34 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. DUEWEKE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16297 ROBIE LANE  
 City LOS GATOS State CA Zip Code 95032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : ACC63D19CA61F4F69AA7**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. ZERR, JOHN, C, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 184  
 City GEIGERTOWN State PA Zip Code 19523-0184  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CARPENTER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 264.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A009ECAE84ACC43B6B0D**  
 Amount of Each Receipt this Period 53.00  
 Memo Item

**C. JACOBS, PARVIN, MODABER, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2230 VERSAILLES CT  
 City HENDERSON State NV Zip Code 89074-5302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) DOCTOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 12 / 2018  
**Transaction ID : A6B1EA5927D9C40C2A75**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1153.00  
**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 35 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
POSSIN, MARC, S, ,

Mailing Address 6093 N 2200TH AVE

City GENESEO	State IL	Zip Code 61254-8834
-----------------	-------------	------------------------

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

Name of Employer (for Individual) JOHN DEERE SHARED SERVICES INC	Occupation (for Individual) TECHNOLOGY ARCHITECT
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : A5C1C2B196B3341B9AAB**

Amount of Each Receipt this Period  
800.00

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
KNOLL, ROBERT, , MR,

Mailing Address 7781 ANCHORAGE DR SE

City CALEDONIA	State MI	Zip Code 49316-7353
-------------------	-------------	------------------------

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

Name of Employer (for Individual) INTEGRITY BUSINESS SOLUTIONS	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : A3C7F77F0AD29465BA25**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
JAMES, JERRY, G, ,

Mailing Address 409 42ND AVE

City GREELEY	State CO	Zip Code 80634
-----------------	-------------	-------------------

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

Name of Employer (for Individual) O I	Occupation (for Individual) MOLD TECHNICIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		12		2018

**Transaction ID : ADA422191F2EE485F967**

Amount of Each Receipt this Period  
250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. PFLANTZ, WARREN, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1222 TELEGRAPH RD  
 City ARNOLD State MO Zip Code 63010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) DES PEYES HOSPITAL Occupation (for Individual) GROUNDKEEPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : AAF1BB30DF9524463B56**  
 Amount of Each Receipt this Period 450.00  
 Memo Item

**B. KUBIN, DANIEL, D, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1701 BLOUNT ST  
 City HOUSTON State TX Zip Code 77008-4441  
 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 ▼ 800.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : AC841CE1402D441A6BE4**  
 Amount of Each Receipt this Period 200.00  
 Memo Item

**C. PRAEGER, DOROTHY, A, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 59 SAN BENITO WAY  
 City SAN FRANCISCO State CA Zip Code 94127-1501  
 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 ▼ 350.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : A70243F437BFF418BB63**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. FOERSTER, JOAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1882 FERNRIDGE DR  
 City SAN DIMAS State CA Zip Code 91773  
 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 ▼ 500.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : A69037EDFF460473FB3B**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. MARX, RICHARD, C, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 440  
 City WAPPINGERS FALLS State NY Zip Code 12590-0440  
 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 ▼ 460.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : A419F27C3EA9043DBA38**  
 Amount of Each Receipt this Period 230.00  
 Memo Item

**C. EYESTONE, MAYNARD, M, DR., PHD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 E WINGER RD  
 City MEAD State WA Zip Code 99021  
 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 ▼ 850.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : AEEAD4237F7204655A8F**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	830.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. DHANSE, CATHERINE, A, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 DONNAN AVE  
APT E9

City WASHINGTON State PA Zip Code 15301-6558

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

Name of Employer (for Individual) WINK CHERO & REHAB Occupation (for Individual) CHIRO ASSISTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt 07 / 13 / 2018  
**Transaction ID : A1FD3D5402E744788890**

Amount of Each Receipt this Period 45.00

Memo Item

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

Mailing Address 107 HILLTOP RD

City BLOOMINGTON State IL Zip Code 61701

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 ▼ 845.00

Date of Receipt 07 / 15 / 2018  
**Transaction ID : A8AC5676CB4984655BB1**

Amount of Each Receipt this Period 100.00

Memo Item

**C. STEWART, M, SUSAN, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 638

City OXFORD State MD Zip Code 21654

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 ▼ 225.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : AF0621BA2A8FD48FD914**

Amount of Each Receipt this Period 25.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 170.00

**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 39 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. WORKER, JANE, M, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2292 COUNTY RD 127

City PENROSE	State CO	Zip Code 81240
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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 ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : AE777A09966164224B15**

Amount of Each Receipt this Period  
30.00

Memo Item

**B. EYESTONE, MAYNARD, M, DR., PHD**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2803 E WINGER RD

City MEAD	State WA	Zip Code 99021
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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 ▼  
900.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : ABEB558AD6693403D9FD**

Amount of Each Receipt this Period  
50.00

Memo Item

**C. PRETZ, JEANIE, S, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 WOODROW ST  
UNIT 501

City COLUMBIA	State SC	Zip Code 29205-1772
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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 ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : A77E36508DC844D99A68**

Amount of Each Receipt this Period  
300.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	380.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 87
	<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)  
**STARS AND STRIPES FOREVER PAC**

**A. HESSELMAN, CLAUDE, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2545 BAINBRIDGE BLVD  
 City CHESAPEAKE State VA Zip Code 23324  
 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 ▼ 340.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : A88ADD7BF79E44FA4B8A**  
 Amount of Each Receipt this Period 170.00  
 Memo Item

**B. BROWN, KATHRYN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 815  
 City LAKE CITY State SC Zip Code 29560  
 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 ▼ 281.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : A28FB64B864A94DE5B70**  
 Amount of Each Receipt this Period 59.00  
 Memo Item

**C. REICHERT, LARRY, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 341 210TH AVE  
 City HAYS State KS Zip Code 67601  
 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 ▼ 300.00

Date of Receipt 07 / 16 / 2018  
**Transaction ID : AA995615BA72C4BDF9E5**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	329.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. MUNN, ARNOLD, S, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9708 W HAWTHORNE ST

City CRYSTAL RIVER	State FL	Zip Code 34428-6111
-----------------------	-------------	------------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : AE1574A34F44E4778A61**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. ROSEMA, CARL, E, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10934 PORTAGE RD

City PORTAGE	State MI	Zip Code 49002-7309
-----------------	-------------	------------------------

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 ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : AF933EFC804274370AEA**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. PRIMROSE, MIKE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12008 IRISH MIST RD NE

City ALBUQUERQUE	State NM	Zip Code 87122-3151
---------------------	-------------	------------------------

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		16		2018

**Transaction ID : AE713A336B6EB42FCA9D**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. LAINE, BETH, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7630 BRENT LN

City LAS VEGAS	State NV	Zip Code 89131-1712
-------------------	-------------	------------------------

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

Name of Employer (for Individual) VA	Occupation (for Individual) PHYSICIAN
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2018

**Transaction ID : ABB40E3B2DEC84C80A0C**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. TINGLE, RALPH, J, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5960

City SANTA FE	State NM	Zip Code 87502
------------------	-------------	-------------------

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 ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	16	/	2018

**Transaction ID : A720261050A8C42CA90E**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. EHRKE, MARGARET, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 JAMES

City ALMA	State NE	Zip Code 68920
--------------	-------------	-------------------

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

Name of Employer (for Individual) ALMA PUBLIC SCHOOL	Occupation (for Individual) TEACHER
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2018

**Transaction ID : A74BC90E401414D31B33**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. CARTER, JAY, W, MR, JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2730 COMMERCE ST  
 STE 500  
 City WICHITA FALLS State TX Zip Code 76301-8000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CARTER AVIATION Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 251.00

Date of Receipt 07 / 17 / 2018  
**Transaction ID : A881EDBD375D74CADBD**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. WELLS, KEITHA, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3911 APPALACHIAN TRL  
 City KINGWOOD State TX Zip Code 77345-1022  
 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 ▼ 1321.08

Date of Receipt 07 / 18 / 2018  
**Transaction ID : A400CF31E31BA4AEA8CE**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. DAROLD, ALFRED, J, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 25144 SUTTON CT  
 City NOVI State MI Zip Code 48374-2222  
 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 ▼ 300.00

Date of Receipt 07 / 18 / 2018  
**Transaction ID : A8E89755B611B42249A6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 175.00  
**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 44 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. ALTON, DUANE, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 712 N LANCASHIRE LN

City LIBERTY LAKE	State WA	Zip Code 99019-8531
----------------------	-------------	------------------------

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 ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2018

**Transaction ID : AB78CA08061314F6CAC3**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BROWN, HELEN, M, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 403 W MAIN ST

City SILVER LAKE	State IN	Zip Code 46982
---------------------	-------------	-------------------

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 ▼  
2200.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2018

**Transaction ID : A04D2198AB3554BEB9E9**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. LANGENBAHN, JANET, K, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 407 N KICKAPOO ST

City LINCOLN	State IL	Zip Code 62656
-----------------	-------------	-------------------

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 ▼  
280.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		18		2018

**Transaction ID : A91C302D9E6804F83BD8**

Amount of Each Receipt this Period  
25.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. FLORES, CLEMENTINA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 11643 CHERRYLEE DR  
 City EL MONTE State CA Zip Code 91732-1402  
 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 ▼ 215.00

Date of Receipt 07 / 18 / 2018  
**Transaction ID : A068DCCAC600C49E8A0D**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. SIPES, ROBERT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1271 ARLINGTON WAY  
 City BRENTWOOD State CA Zip Code 94513  
 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 ▼ 575.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : A34F362D75146401788A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. ALLEN, JEAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1522 LAKE SHORE DR  
 City LONG BEACH State IN Zip Code 46360-1456  
 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 ▼ 375.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : A76AAA82EFCEF4AE5932**  
 Amount of Each Receipt this Period 125.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. PALMER, DONALD, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4704 CAMBRIDGE CT

City LAKE OSWEGO	State OR	Zip Code 97035-5386
---------------------	-------------	------------------------

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 ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2018

**Transaction ID : A243113AE66FB449B891**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. WIEGAND, EDWARD, W, CAPT,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 CAYMAN ISLES BLVD

City ENGLEWOOD	State FL	Zip Code 34223-1832
-------------------	-------------	------------------------

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 ▼  
375.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2018

**Transaction ID : A79CA4F359DDD480A89**

Amount of Each Receipt this Period  
100.00

Memo Item

**C. GRAY, JOHN, S, , JR**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7767 MELANIE CIR

City TALBOTT	State TN	Zip Code 37877-8951
-----------------	-------------	------------------------

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 ▼  
255.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2018

**Transaction ID : A70AD64E0E7BF4CF4B3C**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	235.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 47 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. MEISSNER, MIKE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 WEEPING SPRUCE PL  
 City CONROE State TX Zip Code 77384  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHERUM PHILLIP CHEMICAL CO. Occupation (for Individual) FINANCE MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : A570DB9D3620F42EDA8C**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. ASH, FREDRICK, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10482 WHEELER ST  
 City HAYWARD State WI Zip Code 54843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : AC194133EF8534948AFA**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. ZACHRY, GUY, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 CYPRESS CV  
 City YOUNGSVILLE State LA Zip Code 70592  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PROF. COUNSELOR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 725.00

Date of Receipt 07 / 19 / 2018  
**Transaction ID : A03033DDED5D44E98815**  
 Amount of Each Receipt this Period 175.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 775.00  
**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 48 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. BRYANT, ANTHONY, W, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 108 N BARSTOW ST  
 City WAUKESHA State WI Zip Code 53186  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CENTURY FENCE CO Occupation (for Individual) EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : AF93289C2011B4CEBB28**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. VACCARO, PATRICK, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 261 STUART DR  
 City NEW ROCHELLE State NY Zip Code 10804-1422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : A1A38FEACDC3E46788C2**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. MELCHER, LOUISE, , MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10785 CHERRY HILL DR  
 City SAN DIEGO State CA Zip Code 92130  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : A45313047F743412998A**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 400.00  
**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 49 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. FURLONG, POLLY, A, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 73 PICKETT RD  
 City DOVER State PA Zip Code 17315-3116  
 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 ▼ 213.00

Date of Receipt 07 / 20 / 2018  
**Transaction ID : AC9D941AD8AC94A6B950**  
 Amount of Each Receipt this Period 40.00  
 Memo Item

**B. EYESTONE, MAYNARD, M, DR., PHD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 E WINGER RD  
 City MEAD State WA Zip Code 99021  
 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 ▼ 950.00

Date of Receipt 07 / 22 / 2018  
**Transaction ID : A4A7C82B09C2042F795C**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. WELLS, KEITHA, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3911 APPALACHIAN TRL  
 City KINGWOOD State TX Zip Code 77345-1022  
 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 ▼ 1341.26

Date of Receipt 07 / 22 / 2018  
**Transaction ID : AE92FCCBF5D284CA384F**  
 Amount of Each Receipt this Period 20.18  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional).....▶ 110.18  
**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 50 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. WUTKE, MARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6666 ODANA RD  
 STE 215  
 City MADISON State WI Zip Code 53719  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FINANCE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 22 / 2018  
**Transaction ID : A3D67B8294F9F48FEA93**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. DORR, DOLORES, E, MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1416 LINDEN DR  
 City NEW CASTLE State IN Zip Code 47362-1728  
 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 ▼ 288.00

Date of Receipt 07 / 23 / 2018  
**Transaction ID : A1B807A9D707649D1AE6**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. BERNATCHEZ, ROBERT, A, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 26 MARK CIR  
 City RUTLAND State MA Zip Code 01543-1557  
 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 ▼ 203.00

Date of Receipt 07 / 23 / 2018  
**Transaction ID : A4C6EDBBEE2084EC3A6B**  
 Amount of Each Receipt this Period 53.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	403.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. BRANDEL, JAMES, B, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5713 JACK RD

City JACKSONVILLE	State FL	Zip Code 32277-2429
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2018

**Transaction ID : A312093B2E3EE4BF6954**

Amount of Each Receipt this Period  
250.00

Memo Item

**B. BRANDEL, JAMES, B, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5713 JACK RD

City JACKSONVILLE	State FL	Zip Code 32277-2429
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ACCOUNTANT
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2018

**Transaction ID : A6D652B8A660B47C78B0**

Amount of Each Receipt this Period  
250.00

Memo Item

**C. TURNER, CHARLES, D, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 86 SEALS RD

City DALLAS	State GA	Zip Code 30157-6736
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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 ▼  
305.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2018

**Transaction ID : A130A55578DC2425FBF7**

Amount of Each Receipt this Period  
35.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	535.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 52 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SHOTWELL, DONNA, JEAN, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1261 PINE CREEK WAY  
APT B

City CONCORD State CA Zip Code 94520-3645

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 ▼  
250.00

Date of Receipt  
07 / 23 / 2018  
Transaction ID : **A5C53CD9F9779405A8B0**

Amount of Each Receipt this Period  
40.00

Memo Item

**B. BERRY, JAMES, O, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 91652

City MOBILE State AL Zip Code 36691-1652

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

Name of Employer (for Individual) ALABAMA STATE Occupation (for Individual) ACCOUNTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
505.00

Date of Receipt  
07 / 23 / 2018  
Transaction ID : **A9ED7D3302A0A41DF9BE**

Amount of Each Receipt this Period  
70.00

Memo Item

**C. HERBERT, DOROTHY, L, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 5294

City AUGUSTA State ME Zip Code 04332-5294

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 ▼  
350.00

Date of Receipt  
07 / 23 / 2018  
Transaction ID : **A64D5EA232726419E8C9**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. KRICK, DONALD, H, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 840 STONEY CREEK DR  
APT A

City DAUPHIN State PA Zip Code 17018-9649

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 ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2018

Transaction ID : **AE4849BA95C054CE9B23**

Amount of Each Receipt this Period  
300.00

Memo Item

**B. MALOTT, GARY, W, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 8586

City PORTER RANCH State CA Zip Code 91327

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 ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
07 / 23 / 2018

Transaction ID : **ACB96325EB56A4F4A9EA**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 668 MEADOW CANYON DR

City PITTSBURG State CA Zip Code 94565

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 ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
07 / 25 / 2018

Transaction ID : **A894C3D537A8E48F4A3A**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 87
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. WHITTINGTON, JEFF, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 721 SEABOARD ST  
 STE 3  
 City MYRTLE BEACH State SC Zip Code 29577  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) COASTAL CRAPE SERVICE Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 25 / 2018  
**Transaction ID : A153C36F8927D4C3494E**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. DOTINGA, JAMES, W, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4026 SALT SPRING DR  
 City FERNDALE State WA Zip Code 98248-9538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) APT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : AB3104D833C3F422B81B**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**C. GRAY, JOHN, S, , JR**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7767 MELANIE CIR  
 City TALBOTT State TN Zip Code 37877-8951  
 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 ▼ 285.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : A0CAE470CE0234CFA8F1**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SIPES, ROBERT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1271 ARLINGTON WAY  
 City BRENTWOOD State CA Zip Code 94513  
 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 ▼ 655.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : A1AC1BD39A00448F18B9**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**B. ST CLAIR, ANNE, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8900 INGLESIDE FARM LN  
 City MECHANICSVILLE State VA Zip Code 23111-2600  
 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 ▼ 452.00

Date of Receipt 07 / 26 / 2018  
**Transaction ID : A961E36C7F16146F6A3C**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. NEIGER, NORMAN, L, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4810 14TH ST  
 City WINONA State MN Zip Code 55987-6123  
 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 ▼ 250.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : AA4A36D0CE03D4252AE2**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	230.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 56 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SPERBER, MICHAEL, L, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 793 S JASPER DR  
 City PUEBLO WEST State CO Zip Code 81007  
 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 ▼ 1000.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : A1C080877B95B4EC0B59**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**B. EYESTONE, MAYNARD, M, DR., PHD**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2803 E WINGER RD  
 City MEAD State WA Zip Code 99021  
 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 ▼ 980.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : A28346CAE7771401DB34**  
 Amount of Each Receipt this Period 30.00  
 Memo Item

**C. GHIZ, ROBERT, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12 MIDDLESEX AVE  
 City WORCESTER State MA Zip Code 01604-1932  
 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 ▼ 235.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : A2FE690B802BA47288CC**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1080.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 87
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. ENRIQUEZ, VIRGINIA, P, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6428 SOLANDRA DR S  
 City JACKSONVILLE State FL Zip Code 32210-7065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) VOLUNTEER Occupation (for Individual) VOLUNTEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : A30B6EB5FF4514093A3E**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. O'KEEFFE, WILLIAM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 820 LAGUNA HONDA BLVD  
 City SAN FRANCISCO State CA Zip Code 94127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) O'KEEFFE'S INC Occupation (for Individual) PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 27 / 2018  
**Transaction ID : A878321E5ADEF42AFB35**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. KAPETANSKY, FRED, M, DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2599 SONATA DR  
 City COLUMBUS State OH Zip Code 43209-3212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OHIO STATE UNIVERSITY Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 07 / 29 / 2018  
**Transaction ID : A547DBF0254A544A3968**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 58 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. DUEWEKE, PAUL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16297 ROBIE LANE  
 City LOS GATOS State CA Zip Code 95032  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 07 / 30 / 2018  
**Transaction ID : AF2CD8D3801F84447A28**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

**B. MCWHIRTER, DOROTHY, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 BUCKSKIN RD  
 City BELL CANYON State CA Zip Code 91307-1123  
 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 ▼ 600.00

Date of Receipt 07 / 30 / 2018  
**Transaction ID : A91DFB0421A8A4F6E9D5**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. HUNT, KENNETH, C, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 1302  
 City DILLON State MT Zip Code 59725  
 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 ▼ 250.00

Date of Receipt 07 / 30 / 2018  
**Transaction ID : A528C7CC303F04BBFBEC**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 59 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. TEETS, JOHN, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 949 RIVER ST

City GASSAWAY	State WV	Zip Code 26624-1183
------------------	-------------	------------------------

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 ▼  
445.18

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2018

**Transaction ID : A1C9EA9873E414DD29D6**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. NEIGER, NORMAN, L, MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4810 14TH ST

City WINONA	State MN	Zip Code 55987-6123
----------------	-------------	------------------------

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 ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2018

**Transaction ID : A54E49A4C2930492B98E**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 383F NEPONSET ST

City NORWOOD	State MA	Zip Code 02062
-----------------	-------------	-------------------

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 ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2018

**Transaction ID : A716A6A5B4B0C4B99A44**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. COLLINS, JOHN, M, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 700 OCEAN AVE  
 UNIT 129  
 City SPRING LAKE State NJ Zip Code 07762  
 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 ▼ 300.00

Date of Receipt 07 / 30 / 2018  
**Transaction ID : A4826FAB8D53E4D72BDD**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. FRIEDRICH, JOSEPH, H, MR,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8045 ADAM CT  
 City GRANITE BAY State CA Zip Code 95746-9588  
 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 ▼ 300.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : A032568EFBFA946CC922**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. DILL, WALTER, S, MR, USN RET**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 752 JONATHON PL  
 City ESCONDIDO State CA Zip Code 92027-1810  
 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 ▼ 285.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : A939E2358CDA24A4BB9E**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 OF 87
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. REINDERS, GLENN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3479 SHERMAN RD  
 City JACKSON State WI Zip Code 53037  
 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 ▼ 300.00

Date of Receipt 07 / 31 / 2018  
**Transaction ID : ACA11CC7F778E41E2B24**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. WELLS, KEITHA, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3911 APPALACHIAN TRL  
 City KINGWOOD State TX Zip Code 77345-1022  
 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 ▼ 1741.26

Date of Receipt 07 / 31 / 2018  
**Transaction ID : AF81D6872E1D248009F4**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. WELLS, KEITHA, K, MS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3911 APPALACHIAN TRL  
 City KINGWOOD State TX Zip Code 77345-1022  
 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 ▼ 1741.26

Date of Receipt 07 / 31 / 2018  
**Transaction ID : AFAE34B972E1E477CAC1**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 62 OF 87
<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

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. SHIVELY, DOUGLAS, , MR,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 900 S WALNUT ST

City ANAHEIM	State CA	Zip Code 92802-1706
-----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CPA
--	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2018

**Transaction ID : AFAB94302B5FB48508DC**

Amount of Each Receipt this Period  
100.00

Memo Item

**B. SMITH, S, LEE, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1154 HARVEST GLEN DR NW

City CLEVELAND	State TN	Zip Code 37312-6361
-------------------	-------------	------------------------

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

Name of Employer (for Individual) US POSTAL SERVICE	Occupation (for Individual) CUSTODIAN
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1575.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		31		2018

**Transaction ID : AF6DE92FFC7E14CF897E**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	59261.18

**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 63 OF 87
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

**A. OMEGA LIST COMPANY**

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

Mailing Address 1420 SPRING HILL ROAD  
SUITE 490

City MCLEAN State VA Zip Code 22102

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 ▼  
45250.21

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 05 / 2018

**Transaction ID : AA8F48B1591B0494B919**

Amount of Each Receipt this Period  
3794.78

Memo Item  
LIST RENTAL

**B.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

**C.**

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

Mailing Address

City State Zip Code

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3794.78
<b>TOTAL</b> This Period (last page this line number only).....	3794.78

**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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial)

**A. YOUNG AMERICAS FOUNDATION**

Mailing Address 110 ELDEN STREET SUITE A

City  
HERNDON

State  
VA

Zip Code  
20170-4887

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

**C**

Transaction ID : B006F53BDC

Amount of Each Disbursement this Period

3	2	0	.	7	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**B. PINKSTON GROUP**

Mailing Address 5270 SHAWNEE ROAD SUITE 102

City  
ALEXANDRIA

State  
VA

Zip Code  
22312

Purpose of Disbursement  
PUBLIC RELATIONS AND WEBSITE MAINTENANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	2			2	0	1	8		

FEC Identification Number

**C**

Transaction ID : B74280DD8F

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 2812 EMERYWOOD PARKWAY

City  
RICHMOND

State  
VA

Zip Code  
23294

Purpose of Disbursement  
PAYROLL SERVICE FEE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	6			2	0	1	8		

FEC Identification Number

**C**

Transaction ID : B0F446F94C

Amount of Each Disbursement this Period

5	0	.	2	9
---	---	---	---	---

Memo Item

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

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

1	3	7	0	.	9	9
---	---	---	---	---	---	---

5	0	.	2	9
---	---	---	---	---



**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)  
**STARS AND STRIPES FOREVER PAC**

**A. ARISTOTLE INTERNATIONAL**

Full Name (Last, First, Middle Initial)

Mailing Address 205 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003-1164

Purpose of Disbursement COMPLIANCE DATABASE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 06 / 2018

FEC Identification Number: C

Transaction ID : BE1698E751f

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. VALTIM**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 809  
1095 VENTURE DR

City FOREST State VA Zip Code 24551-0809

Purpose of Disbursement FUNDRAISING DIRECT MAIL EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2018

FEC Identification Number: C

Transaction ID : B5B17157760

Amount of Each Disbursement this Period: 88.18

Memo Item

**C. EBERLE COMMUNICATIONS GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING DIRECT MAIL DATA CENTER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 09 / 2018

FEC Identification Number: C

Transaction ID : B83406F9F5:

Amount of Each Disbursement this Period: 2991.26

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4079.44

**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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial)

**A. DESERT FOX STRATEGIC COMMUNICATIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2018

Mailing Address 5841 E CHARLESTON BLVD  
SUITE 230-226

FEC Identification Number

**C** [ ]  
**Transaction ID : BB7B1CC190**  
Amount of Each Disbursement this Period  
[ ] 1000.00

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement  
COMMUNICATIONS CONSULTING

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. ATKINSON, MAURICE, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2018

Mailing Address 695 FRIAR TUCK LN

FEC Identification Number

**C** [ ]  
**Transaction ID : B1FC2504DEI**  
Amount of Each Disbursement this Period  
[ ] 750.00

City MACON State GA Zip Code 31220

Purpose of Disbursement  
SOCIAL MEDIA CONSULTING

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. SARACINO, WILLIAM, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	15	/	2018

Mailing Address 3625 ANGELUS AVE

FEC Identification Number

**C** [ ]  
**Transaction ID : BBC9BA9B3**  
Amount of Each Disbursement this Period  
[ ] 1500.00

City GLENDALE State CA Zip Code 91208

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

[ ]  
Category/  
Type

Candidate Name

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

Memo Item

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

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

[ ] 3250.00  
[ ]

**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)  
**STARS AND STRIPES FOREVER PAC**

**A. SOUSA, JOHN, P, , IV**

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD  
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

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

State: District:

Date of Disbursement 07 / 15 / 2018

FEC Identification Number C

Transaction ID : B1E49F8A25I

Amount of Each Disbursement this Period 3500.00

Memo Item

**B. CAMPAIGN FUNDING DIRECT**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL ROAD, SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement FUNDRAISING DIRECT MAIL EXPENSE

Candidate Name

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

State: District:

Date of Disbursement 07 / 16 / 2018

FEC Identification Number C

Transaction ID : BFD400CC12I

Amount of Each Disbursement this Period 4763.47

Memo Item

**C. WASHINGTON INTELLIGENCE BUREAU**

Full Name (Last, First, Middle Initial)

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement DONATION PROCESSING, CAGING, BOOKKEEPING

Candidate Name

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

State: District:

Date of Disbursement 07 / 16 / 2018

FEC Identification Number C

Transaction ID : B7AA954C7E

Amount of Each Disbursement this Period 2245.76

Memo Item

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

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

10509.23

**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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial)

**A. PARAMOUNT COMMUNICATIONS**

Mailing Address 525-K EAST MARKET STREET SUITE 114

City LEESBURG State VA Zip Code 20176

Purpose of Disbursement  
EMAIL DISTRIBUTION SERVICE

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BD5E4DD890**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL DATA MANAGEMENT, INC.**

Mailing Address 3200 WEST MARKET ST. SUITE 302

City AKRON State OH Zip Code 44333

Purpose of Disbursement  
DIRECT MAIL THANK YOU PRINTING

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : BA17F9DE2A**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. WILLIAM J. OLSON, P.C.**

Mailing Address 370 MAPLE AVENUE WEST  
SUITE 4

City VIENNA State VA Zip Code 22180-5615

Purpose of Disbursement  
LEGAL FEES

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B7021C106D**  
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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 2812 EMERYWOOD PARKWAY

City RICHMOND State VA Zip Code 23294

Purpose of Disbursement  
PAYROLL SERVICE FEE

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B0989D45D1:**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SISK FULFILLMENT SERVICES**

Mailing Address 1900 INDUSTRIAL PARK DR.

City FEDERALSBURG State MD Zip Code 21632

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B7DF7E4520f**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. BB&T**

Mailing Address 300 S WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
BANK FEES

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B0CB8C4C3:**  
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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial)

**A. SAVANNA COMMUNICATIONS**

Mailing Address 755 SONNE DRIVE

City  
ANNAPOLIS

State  
MD

Zip Code  
21401-7120

Purpose of Disbursement  
GENERAL MEDIA CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B01C4F3B2E**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. D&D UNLIMITED**

Mailing Address 524 MID FLORIDA DR. SUITE 202

City  
ORLANDO

State  
FL

Zip Code  
32824-7057

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B1B3BC6BDC**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. RST MARKETING**

Mailing Address 1272 CORPORATE PARK ROAD

City  
FOREST

State  
VA

Zip Code  
24551

Purpose of Disbursement  
FUNDRAISING DIRECT MAIL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B8109C14E6**  
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)  
**STARS AND STRIPES FOREVER PAC**

**A. SOUSA, JOHN, P, , IV**

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD  
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2018

FEC Identification Number: C

Transaction ID : BBE37004DD

Amount of Each Disbursement this Period: 3500.00

Memo Item

**B. ATKINSON, MAURICE, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 695 FRIAR TUCK LN

City MACON State GA Zip Code 31220

Purpose of Disbursement SOCIAL MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2018

FEC Identification Number: C

Transaction ID : B93CEC0E72

Amount of Each Disbursement this Period: 750.00

Memo Item

**C. ZIP MAILING SERVICES, INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 6304 SHERIFF RD. STE Z

City LANDOVER State MD Zip Code 20785-4361

Purpose of Disbursement FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
07 / 30 / 2018

FEC Identification Number: C

Transaction ID : BCC62F774E

Amount of Each Disbursement this Period: 1131.16

Memo Item

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

5381.16

**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)  
**STARS AND STRIPES FOREVER PAC**

**A. HUCKABY DAVIS LISKER**

Full Name (Last, First, Middle Initial)

Mailing Address 228 S WASHINGTON STREET  
SUITE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
FEC COMPLIANCE AND ACCOUNTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 31 / 2018

FEC Identification Number: C

Transaction ID : BCB9F5FBC!

Amount of Each Disbursement this Period: 2750.00

Memo Item

**B. FIRST VIRGINIA COMMUNITY BANK**

Full Name (Last, First, Middle Initial)

Mailing Address 11325 RANDOM HILL ROAD

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
BANK CHARGES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 31 / 2018

FEC Identification Number: C

Transaction ID : B048C56EFF!

Amount of Each Disbursement this Period: 873.06

Memo Item

**C. SOUSA, JOHN, P, , IV**

Full Name (Last, First, Middle Initial)

Mailing Address 11-C TALCOTT FOREST RD  
UNIT C

City FARMINGTON State CT Zip Code 06032

Purpose of Disbursement  
EXPENSE REIMBURSEMENT: SEE ITEMIZATION BELOW

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 20 / 2018

FEC Identification Number: C

Transaction ID : B7DB8D3FB!

Amount of Each Disbursement this Period: 1941.45

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5564.51

**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)  
**STARS AND STRIPES FOREVER PAC**

**A. WESTIN GEORGETOWN**

Full Name (Last, First, Middle Initial)

Mailing Address 2350 M STREET NW

City WASHINGTON State DC Zip Code 20037-1417

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2018

FEC Identification Number: C

Transaction ID : B2297F7EE6/

Amount of Each Disbursement this Period: 435.69

Memo Item

**B. AMERICAN PRIME**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 SPRING HILL RD

City MC LEAN State VA Zip Code 22102-3006

Purpose of Disbursement MEALS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2018

FEC Identification Number: C

Transaction ID : B83E3BD4E0/

Amount of Each Disbursement this Period: 260.46

Memo Item

**C. AVIS**

Full Name (Last, First, Middle Initial)

Mailing Address 6 SYLVAN WAY

City PARSIPPANY State NJ Zip Code 07054-3826

Purpose of Disbursement CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 20 / 2018

FEC Identification Number: C

Transaction ID : BF76C199A3

Amount of Each Disbursement this Period: 168.99

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 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)  
**STARS AND STRIPES FOREVER PAC**

Full Name (Last, First, Middle Initial) <b>A. SHERATON SUITES ALEXANDRIA</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2018
Mailing Address 801 N SAINT ASAPH ST		FEC Identification Number C [REDACTED] <b>Transaction ID : BCD6AE2C0f</b> Amount of Each Disbursement this Period [REDACTED] 202.72
City ALEXANDRIA	State VA	Zip Code 22314-1717
Purpose of Disbursement TRAVEL		Category/Type 002
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JETBLUE</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2018
Mailing Address 2701 QUEENS PLZ N STE 1		FEC Identification Number C [REDACTED] <b>Transaction ID : B55D61644A!</b> Amount of Each Disbursement this Period [REDACTED] 459.38
City LONG ISLAND CITY	State NY	Zip Code 11101-4021
Purpose of Disbursement TRAVEL		Category/Type 002
Candidate Name		Memo Item <input checked="" type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ALEXANDRIAN</b>		Date of Disbursement MM / DD / YYYY 07 / 20 / 2018
Mailing Address 480 KING ST		FEC Identification Number C [REDACTED] <b>Transaction ID : B664BBF54C</b> Amount of Each Disbursement this Period [REDACTED] 243.99
City ALEXANDRIA	State VA	Zip Code 22314-3102
Purpose of Disbursement TRAVEL		Category/Type 002
Candidate Name		Memo Item <input checked="" type="checkbox"/>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED] 52270.79

**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 type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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)  
**STARS AND STRIPES FOREVER PAC**

**A. DEAMER, RAYMOND, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1530 QUARRY LN

City LANCASTER State PA Zip Code 17603-2467

Purpose of Disbursement REFUND

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 07 / 30 / 2018

FEC Identification Number: C

Transaction ID : B7C9CF4A1A

Amount of Each Disbursement this Period: 30.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	30.00

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 76 OF 87
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : D6559BDE95FDC440AB0C	
<input type="text" value="359.86"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="359.86"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ZIP MAILING SERVICES, INC.</b>			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785-4361	

Outstanding Balance Beginning This Period	Transaction ID : DB3A9E4511F0D43FE9F0	
<input type="text" value="244.30"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="244.30"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : DB3599CB6858D47F8AE3	
<input type="text" value="152.24"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="152.24"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="512.10"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 77 OF 87
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : DE3DE2357736D480DBE9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : D884ACEC69EF040E6BED	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : DA725793F4A0D4B5D8F7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	456.72
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 78 OF 87
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : D1866EFE07A48488E9C9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : DD75B34F6EA7F48CBB5E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : D0EA0DD9F7B6044CFB67	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	456.72
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 79 OF 87
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**STARS AND STRIPES FOREVER PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : DB633ED2A78024064B6A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>OMEGA LIST COMPANY</b>			Nature of Debt (Purpose): DIRECT MAIL LIST RENTAL/EXCHANGE
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 152.24	Transaction ID : D2226CE03060D47C3BDB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24

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

Outstanding Balance Beginning This Period	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	304.48
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1730.02
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1730.02

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>STARS AND STRIPES FOREVER PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00635243
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNA COMMUNICATIONS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>755 SONNE DRIVE</b>		Amount <input type="text"/> 3380.00
City <b>ANNAPOLIS</b>	State <b>MD</b>	
Zip Code <b>21401-7120</b>	Purpose of Expenditure <b>RADIO ADVERTISEMENT PRODUCTION/PLACEMENT</b>	Transaction ID : <b>E6A6975E949EE4E8F932</b>
Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	Name of Federal Candidate: <b>MCCASKILL, CLAIRE, , ,</b>
Name of Federal Candidate: <b>MCCASKILL, CLAIRE, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 18865.51	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNA COMMUNICATIONS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>755 SONNE DRIVE</b>		Amount <input type="text"/> 2880.00
City <b>ANNAPOLIS</b>	State <b>MD</b>	
Zip Code <b>21401-7120</b>	Purpose of Expenditure <b>RADIO ADVERTISEMENT PRODUCTION/PLACEMENT</b>	Transaction ID : <b>E1DBAA40C598F4D8894F</b>
Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	Name of Federal Candidate: <b>BALDWIN, TAMMY, , ,</b>
Name of Federal Candidate: <b>BALDWIN, TAMMY, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>WI</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 29920.12	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 6260.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , *[Electronically Filed]* Date  /  /

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>STARS AND STRIPES FOREVER PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00635243
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Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNA COMMUNICATIONS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>755 SONNE DRIVE</b>		Amount <input type="text"/> 6590.00
City <b>ANNAPOLIS</b>	State <b>MD</b>	
Zip Code <b>21401-7120</b>	Purpose of Expenditure <b>RADIO ADVERTISEMENT PLACEMENT/PRODUCTION</b>	Transaction ID : <b>E2AA2D9BC9C46497281D</b>
Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	Name of Federal Candidate: <b>DONNELLY, JOSEPH, S, ,</b>
Name of Federal Candidate: <b>DONNELLY, JOSEPH, S, ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 57679.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item <b>SAVANNA COMMUNICATIONS</b>		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address <b>755 SONNE DRIVE</b>		Amount <input type="text"/> 1950.75
City <b>ANNAPOLIS</b>	State <b>MD</b>	
Zip Code <b>21401-7120</b>	Purpose of Expenditure <b>RADIO ADVERTISEMENT PRODUCTION/PLACEMENT</b>	Transaction ID : <b>EF985B23E00FF41D8A17</b>
Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	Name of Federal Candidate: <b>BROWN, SHERROD, , ,</b>
Name of Federal Candidate: <b>BROWN, SHERROD, , ,</b>	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 13081.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 8540.75
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , , [Electronically Filed]  
Signature

Date  /  /

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PRODUCTION/PLACEMENT
Date of Public Distribution/Dissemination 07/02/2018
Amount 4480.00
Transaction ID : EEC0D079AE6A347D683B
Date of Disbursement or Obligation 07/02/2018
Name of Federal Candidate: BROWN, SHERROD, , ,
Office Sought: Senate State: OH
Disbursement For: General 2018

Full Name of Payee ACTION MAILERS
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL EXPENSE
Date of Public Distribution/Dissemination 07/09/2018
Amount 1782.00
Transaction ID : ED4A53454A5D74AF39E8
Date of Disbursement or Obligation 07/09/2018
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Office Sought: Senate State: MO
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 6262.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

08/20/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ZIP MAILING SERVICES, INC.
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785-4361
Purpose of Expenditure PMT FOR EST FROM 11/29/2017. DIRECT MAIL PRINTING
Category/Type
Date of Public Distribution/Dissemination 11/29/2017
Amount 244.30
Transaction ID : E0A1F846E24324AE6964
Date of Disbursement or Obligation 07/09/2018

Name of Federal Candidate: WATERS, MAXINE, , ,
Support Oppose
Office Sought: House District: 43
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 52607.84
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ACTION MAILERS
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL EXPENSE
Category/Type
Date of Public Distribution/Dissemination 07/09/2018
Amount 2754.00
Transaction ID : ED40E33545D074594860
Date of Disbursement or Obligation 07/09/2019

Name of Federal Candidate: WATERS, MAXINE, , ,
Support Oppose
Office Sought: House District: 43
President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 52607.84
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2998.30
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

08/20/2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee ACTION MAILERS
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 31702.12
Disbursement For: General 2018

Full Name of Payee ACTION MAILERS
Mailing Address 90 COMMERCE DRIVE
City ASTON State PA Zip Code 19014-3201
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate: DONNELLY, JOSEPH, S, ,
Calendar Year-To-Date Per Election for Office Sought 59461.50
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 3564.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date

08 / 20 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 4040.47
Disbursement For: General 2018

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL EXPENSE
Name of Federal Candidate: BALDWIN, TAMMY,
Calendar Year-To-Date Per Election for Office Sought 32612.12
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1820.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 08 / 20 / 2018

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) STARS AND STRIPES FOREVER PAC
FEC IDENTIFICATION NUMBER C C00635243

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL EXPENSE
Date of Public Distribution/Dissemination 07/26/2018
Amount 910.00
Transaction ID: E48C653EDD78B44CE84D
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: BROWN, SHERROD, , ,
Support Oppose
Office Sought: House Senate State: OH
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL EXPENSE
Date of Public Distribution/Dissemination 07/26/2018
Amount 910.00
Transaction ID: E93966C4FA640483DB9C
Date of Disbursement or Obligation 07/26/2018

Name of Federal Candidate: STABENOW, DEBBIE, , ,
Support Oppose
Office Sought: House Senate State: MI
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1820.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

[Electronically Filed]

Date 08/20/2018

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>STARS AND STRIPES FOREVER PAC</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00635243
---	--

Check if  24-hour report  48-hour report  New report Amends report filed on  /  /

Full Name of Payee <b>VALTIM</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. BOX 809 1095 VENTURE DR	Amount <input type="text"/> 910.00 <b>Transaction ID : E4E6DFE81C3A94604899</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>FOREST</b> State <b>VA</b> Zip Code <b>24551-0809</b>	
Purpose of Expenditure <b>DIRECT MAIL EXPENSE</b> Category/Type <input type="text"/>	
Name of Federal Candidate: <b>MCCASKILL, CLAIRE, , ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>MO</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2157.51	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <b>VALTIM</b> <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. BOX 809 1095 VENTURE DR	Amount <input type="text"/> 910.00 <b>Transaction ID : ECAAFDE324BC54DAEA</b> Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
City <b>FOREST</b> State <b>VA</b> Zip Code <b>24551-0809</b>	
Purpose of Expenditure <b>DIRECT MAIL EXPENSE</b> Category/Type <input type="text"/>	
Name of Federal Candidate: <b>DONNELLY, JOSEPH, S, ,</b> <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>IN</b>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 60371.50	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/> 1820.00
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
<b>(c) TOTAL</b> Independent Expenditures .....	<input type="text"/> 33085.05

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SATTERFIELD, DAVID, , ,

*[Electronically Filed]*

Date

/  /

Signature