

# 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**  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

ADDRESS (number and street) **PO BOX 72598**  
Check if different than previously reported. (ACC) **NEWPORT KY 41072**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00493924** 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  /  /  2023 through  /  /  2023

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

Signature of Treasurer **BROGHAMER, KEVIN, , ,** [Electronically Filed] Date  /  /  2023

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)

Write or Type Committee Name

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>	<input type="text" value="86205.78"/>	<input type="text" value="86205.78"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="76075.09"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="21530.70"/>	<input type="text" value="24062.79"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="97605.79"/>	<input type="text" value="110268.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="29966.04"/>	<input type="text" value="42628.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="67639.75"/>	<input type="text" value="67639.75"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 03 / 01 / 2023 To: 03 / 31 / 2023

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).....	375.00	1375.00
(ii) Unitemized .....	636.00	2128.77
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1011.00	3503.77
(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) .....	1011.00	3503.77
12. Transfers From Affiliated/Other Party Committees.....	20497.99	20497.99
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	19.23
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	21.71	41.80
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)).....▶	21530.70	24062.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21530.70	24062.79

**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 .....	9966.04	22628.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	9966.04	22628.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	20000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	29966.04	42628.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29966.04	42628.82

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	1011.00	3503.77
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1011.00	3503.77
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	9966.04	22628.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	19.23
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	9966.04	22609.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
	<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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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)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. COOLIDGE, KEVIN, LEE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4936 N PASADENA LN, APT 100  
 City SPOKANE VALLEY State WA Zip Code 99212-4711  
 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 03 / 05 / 2023  
**Transaction ID : SA11A.1444622**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. COOLIDGE, KEVIN, LEE, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4936 N PASADENA LN, APT 100  
 City SPOKANE VALLEY State WA Zip Code 99212-4711  
 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 03 / 16 / 2023  
**Transaction ID : SA11A.1446042**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

**C. GURNEY, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 104 EAST 81ST STREET  
 City NEW YORK State NY Zip Code 10028-1415  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) RESEARCH  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2023  
**Transaction ID : SA11A.1445642**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	175.00
<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 7 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. KONNOR, DELBERT, DANIEL, MR., II**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5137 WOODMIRE LANE  
 City ALEXANDRIA State VA Zip Code 22311-1318  
 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 ▼ 1100.00

Date of Receipt 03 / 31 / 2023  
**Transaction ID : SA11A.1448799**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B. ROISE, ANDREW, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 10940 SOUTH PARKER ROAD PMB 808  
 City PARKER State CO Zip Code 80134-7440  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) EPICOR Occupation (for Individual) ACCOUNT EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 14 / 2023  
**Transaction ID : SA11A.1445758**  
 Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200.00
<b>TOTAL</b> This Period (last page this line number only).....▶	375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. TEAM RAND**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 190

City NEWPORT State KY Zip Code 41072-

FEC ID number of contributing federal political committee. **C** C00766196

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10497.99

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2023  
**Transaction ID : SA12.1448798**

Amount of Each Receipt this Period  
10497.99

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B. DOLD, PAUL, MARK, MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 941 PUEO STREET

City HONOLULU State HI Zip Code 96816-5234

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 09 / 2023  
**Transaction ID : SA.1441465.21.2301**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM RAND

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

Mailing Address 308 SAWGRASS LANE

City BROUSSARD State LA Zip Code 70518-6149

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 ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 04 / 2023  
**Transaction ID : SA.1444533.21.2301**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM TEAM RAND

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10497.99
<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 16
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. SNYDER, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 443 WEST ALAMEDA DRIVE  
 City TEMPE State AZ Zip Code 85282-2049  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) 21ST CENTURY HEALTHCARE Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1666.11

Date of Receipt 03 / 01 / 2023  
**Transaction ID : SA.1448490.21.2301**  
 Amount of Each Receipt this Period 1666.11  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM RAND

**B. TOOKER, DIANE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15802 N. 71ST. ST. #657  
 City SCOTTSDALE State AZ Zip Code 85254-7115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 27 / 2023  
**Transaction ID : SA.1448170.21.2301**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM TEAM RAND

**C. FREEDOM FOR ALL AMERICANS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 824 S. MILLEDGE AVE. STE. 101  
 City ATHENS State GA Zip Code 30605-1332  
 FEC ID number of contributing federal political committee. **C** C00575449  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 31 / 2023  
**Transaction ID : SA11C.1451903**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
 TRANSFER FROM AFFILIATED COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	20497.99

# 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)

## REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

### A. AT&T

Mailing Address 208 S AKARD STREET

City  
DALLAS

State  
TX

Zip Code  
75202-4295

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	24	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3831'

Amount of Each Disbursement this Period

[REDACTED] 285.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. BROGHAMER CONSULTING

Mailing Address 502 MONROE ST

City  
NEWPORT

State  
KY

Zip Code  
41071-2006

Purpose of Disbursement  
COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	15	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I38292

Amount of Each Disbursement this Period

[REDACTED] 3070.95

Memo Item

Full Name (Last, First, Middle Initial)

### C. CMDI

Mailing Address 1593 SPRING HILL RD, STE 400

City  
TYSONS CORNER

State  
VA

Zip Code  
22182

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	02	/	2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3831

Amount of Each Disbursement this Period

[REDACTED] 250.00

Memo Item

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

[REDACTED] 3605.95

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address P.O. BOX 2818

City  
OMAHA

State  
NE

Zip Code  
68103-2818

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3831I

Amount of Each Disbursement this Period

[REDACTED] 5745.17

Memo Item

Full Name (Last, First, Middle Initial)

**B. ADOBE**

Mailing Address 345 PARK AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3833I

Amount of Each Disbursement this Period

[REDACTED] 31.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. ADOBE**

Mailing Address 345 PARK AVENUE

City  
SAN JOSE

State  
CA

Zip Code  
95110

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 15 / 2023

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3833I

Amount of Each Disbursement this Period

[REDACTED] 105.97

Memo Item

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

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

[REDACTED] 5745.17

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. HALEKULANI**

Mailing Address 2199 KALIA ROAD

City  
HONOLULU

State  
HI

Zip Code  
96815

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I3834!**

Amount of Each Disbursement this Period

[REDACTED] 4275.61

Memo Item

Full Name (Last, First, Middle Initial)

**B. HOOTSUITE**

Mailing Address 12 E 49TH ST

City  
NEW YORK

State  
NY

Zip Code  
10017

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I3832!**

Amount of Each Disbursement this Period

[REDACTED] 399.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. INTUIT**

Mailing Address 2632 MARINE WAY

City  
MOUNTAIN VIEW

State  
CA

Zip Code  
94043-1126

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:  
 House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.I3833**

Amount of Each Disbursement this Period

[REDACTED] 90.10

Memo Item

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

[REDACTED] 0.00

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

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. TYPEFORM**

Mailing Address BAC DE RODA 163, BARCELONA

City  
BARCELONA

State  
XX

Zip Code  
08018

Purpose of Disbursement  
SOFTWARE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3834'

Amount of Each Disbursement this Period

[REDACTED] 70.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City  
LEHIGH VALLEY

State  
PA

Zip Code  
18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I38342

Amount of Each Disbursement this Period

[REDACTED] 198.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. US POSTAL SERVICE**

Mailing Address 475 LENFANT PLZ

City  
WASHINGTON

State  
DC

Zip Code  
20260-0001

Purpose of Disbursement  
P.O. BOX RENEWAL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I3831

Amount of Each Disbursement this Period

[REDACTED] 354.00

Memo Item

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

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

[REDACTED] 354.00

[REDACTED]

**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)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. VERIZON WIRELESS**

Mailing Address P.O. BOX 25505

City  
LEHIGH VALLEY

State  
PA

Zip Code  
18002-1025

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		2	8		2	0	2	3		

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.I3831**  
Amount of Each Disbursement this Period  
[ ] 190.85

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]  
Amount of Each Disbursement this Period  
[ ]

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

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

FEC Identification Number

C [ ]  
Amount of Each Disbursement this Period  
[ ]

Memo Item

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

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

[ ]	190.85
[ ]	9895.97

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. HAGEMAN FOR WYOMING

Mailing Address P.O. BOX 4157

City  
CHEYENNE

State  
WY

Zip Code  
82003

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**HAGEMAN, HARRIET, , ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: WY District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	9		2	0	2	3

FEC Identification Number

**C** C00788943

**Transaction ID : SB23.I38317**

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### B. KANSANS FOR MARSHALL

Mailing Address PO BOX 1588

City  
GREAT BEND

State  
KS

Zip Code  
67530

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**MARSHALL, ROGER, W, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2026  
 Primary  General  
 Other (specify)

State: KS District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	3

FEC Identification Number

**C** C00576173

**Transaction ID : SB23.I38316**

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

### C. MOONEY FOR SENATE, INC.

Mailing Address PO BOX 1003

City  
CHARLES TOWN

State  
WV

Zip Code  
25414

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

**MOONEY, ALEXANDER, X, ,**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: WV District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	8		2	0	2	3

FEC Identification Number

**C** C00828475

**Transaction ID : SB23.I38315**

Amount of Each Disbursement this Period

5	0	0	0	0	0
---	---	---	---	---	---

Memo Item

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

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

1	5	0	0	0	0
---	---	---	---	---	---

5	0	0	0	0	0
---	---	---	---	---	---

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**REINVENTING A NEW DIRECTION POLITICAL ACTION COMMITTEE**

**A. NATIONAL REPUBLICAN SENATORIAL COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 425 2ND ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

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

State: District:

Date of Disbursement: 03 / 30 / 2023

FEC Identification Number: C

Transaction ID : SB23.I38318

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20000.00