

**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

KAYLA'S PAC LIST

ADDRESS (number and street)

1032 15th St. NW

Check if different
than previously
reported. (ACC)

#128

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00664706

3. IS THIS
REPORTNEW
(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

M M / D D / Y Y Y Y Y Y
11 06 2018in the
State of

DC

(d) 30-Day
POST-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

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

in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
10 01 2018

through

M M / D D / Y Y Y Y Y Y
10 17 2018

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

Ragusa, Louette, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Ragusa, Louette, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 24 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.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

KAYLA'S PAC LIST

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
10 / 17 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	18413.57	
(c) Total Receipts (from Line 19)	5179.20	90390.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	23592.77	90390.92
7. Total Disbursements (from Line 31).....	10242.25	77040.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	13350.52	13350.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

KAYLA'S PAC LIST

Report Covering the Period:

From:

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

To:

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

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).....	4679.20	88035.92
(ii) Unitemized	500.00	2355.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	5179.20	90390.92
(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)	5179.20	90390.92
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5179.20	90390.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5179.20	90390.92

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	1242.25	11740.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1242.25	11740.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	65300.00
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)) ..	10242.25	77040.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10242.25	77040.40

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5179.20	90390.92
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5179.20	90390.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1242.25	11740.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1242.25	11740.40

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 12
(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)
KAYLA'S PAC LIST

A. Albezem, Rim, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 8 Claire Dr. City Newton State PA Zip Code 18940 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Mercer Bucks Cardiology Occupation (for Individual) Doctor Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 3600.00			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 04 / 2018 Transaction ID : SA11AI.4419 Amount of Each Receipt this Period 400.00 ☐ Memo Item
B. Alsaek, Yaser, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 9410 Grove View Cove City Germantown State TN Zip Code 38139 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 ▼ 3825.60			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 04 / 2018 Transaction ID : SA11AI.4410 Amount of Each Receipt this Period 587.20 ☐ Memo Item
C. Daghistani, Doured, , , Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 5975 SW 104 St. City Miami State FL Zip Code 33156 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 ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 03 / 2018 Transaction ID : SA11AI.4411 Amount of Each Receipt this Period 1000.00 ☐ Memo Item
SUBTOTAL of Receipts This Page (optional)..... ▶			1987.20
TOTAL This Period (last page this line number only)..... ▶			

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 12

☒ 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)

KAYLA'S PAC LIST

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

A. Hamed, Husam, Eddin, ,

Mailing Address 3385 Lady Palm Dr.

City
Mason

State
OH

Zip Code
45040

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2018

Transaction ID : SA11AI.4422

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Kteleh, Tarek, , ,

Mailing Address 10727 Chase Ct.

City
Fishers

State
IN

Zip Code
46037

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Medical Consultants PC

Occupation (for Individual)

Doctor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3616.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 05 / 2018

Transaction ID : SA11AI.4417

Amount of Each Receipt this Period

692.00

☐ Memo Item

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

c. Osman, Ahmed, , ,

Mailing Address 3055 Harbor Dr.
Apt. 1203

City
Fort Lauderdale

State
FL

Zip Code
33316

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 02 / 2018

Transaction ID : SA11AI.4407

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2192.00

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 12

☒ 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)

KAYLA'S PAC LIST

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Suleiman, Saud, , , Mailing Address 1712 Bordeaux Court <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City Port Orange</td> <td style="width: 15%;">State FL</td> <td style="width: 52%;">Zip Code 32127</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual) Port Orange</td> <td style="width: 67%;">Occupation (for Individual) Board/Doctor</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 4500.00			City Port Orange	State FL	Zip Code 32127	Name of Employer (for Individual) Port Orange	Occupation (for Individual) Board/Doctor	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M 10</td> <td style="width: 33%;">D D D 04</td> <td style="width: 34%;">Y Y Y Y Y Y 2018</td> </tr> </table> Transaction ID : SA11AI.4420 Amount of Each Receipt this Period 500.00 ☐ Memo Item		M M M 10	D D D 04	Y Y Y Y Y Y 2018
City Port Orange	State FL	Zip Code 32127										
Name of Employer (for Individual) Port Orange	Occupation (for Individual) Board/Doctor											
M M M 10	D D D 04	Y Y Y Y Y Y 2018										
B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 15%;">State</td> <td style="width: 52%;">Zip Code</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual)</td> <td style="width: 67%;">Occupation (for Individual)</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼ 			City	State	Zip Code	Name of Employer (for Individual)	Occupation (for Individual)	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 34%;">Y Y Y Y Y Y</td> </tr> </table> Amount of Each Receipt this Period ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y
City	State	Zip Code										
Name of Employer (for Individual)	Occupation (for Individual)											
M M M	D D D	Y Y Y Y Y Y										
C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 15%;">State</td> <td style="width: 52%;">Zip Code</td> </tr> </table> FEC ID number of contributing federal political committee. C <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">Name of Employer (for Individual)</td> <td style="width: 67%;">Occupation (for Individual)</td> </tr> </table> Receipt For: ☐ Primary ☐ General ☐ Other (specify) Aggregate Year-to-Date ▼ 			City	State	Zip Code	Name of Employer (for Individual)	Occupation (for Individual)	Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">M M M</td> <td style="width: 33%;">D D D</td> <td style="width: 34%;">Y Y Y Y Y Y</td> </tr> </table> Amount of Each Receipt this Period ☐ Memo Item		M M M	D D D	Y Y Y Y Y Y
City	State	Zip Code										
Name of Employer (for Individual)	Occupation (for Individual)											
M M M	D D D	Y Y Y Y Y Y										
SUBTOTAL of Receipts This Page (optional)..... ▶			500.00									
TOTAL This Period (last page this line number only)..... ▶			4679.20									

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 12

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

KAYLA'S PAC LIST

Full Name (Last, First, Middle Initial)

A. BB&T

Mailing Address 1909 K St. NW

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				02				2018					

FEC Identification Number

C **Transaction ID : SB21B.4392**

Amount of Each Disbursement this Period

 21.33☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BB&T

Mailing Address 1909 K St. NW

City
WashingtonState
DCZip Code
20006Purpose of Disbursement
Merchant Fees

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				15				2018					

FEC Identification Number

C **Transaction ID : SB21B.4393**

Amount of Each Disbursement this Period

 191.02☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Monument ConsultingMailing Address 1440 N Street NW
Ste. 705City
WashingtonState
DCZip Code
20005Purpose of Disbursement
Fundraising Consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
10				11				2018					

FEC Identification Number

C **Transaction ID : SB21B.4394**

Amount of Each Disbursement this Period

 1000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ► 1212.35**TOTAL** This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

☒ 21b	☐ 22	☐ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

KAYLA'S PAC LIST

Full Name (Last, First, Middle Initial)

A. Paypal

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2018

Mailing Address 2211 North First St.

City
San JoseState
CAZip Code
95131Purpose of Disbursement
Online Processing

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : SB21B.4421**

Amount of Each Disbursement this Period

29.90

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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).....▶

29.90

1242.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

KAYLA'S PAC LIST

Full Name (Last, First, Middle Initial)

A. BRAUN VICTORY COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2018

Mailing Address PO BOX 9891

City
ARLINGTONState
VAZip Code
22219Purpose of Disbursement
Political Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☐ General
☒ Other (specify) ▼
Other

State: District:

FEC Identification Number

C C00680454**Transaction ID : SB23.4395**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MICHAEL WALTZ FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2018

Mailing Address 437 OCEAN GROVE CIRCLE

City
ST AUGUSTINEState
FLZip Code
32080Purpose of Disbursement
Political Contribution

Candidate Name

WALTZ, MICHAEL, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify)

State: FL District: 06

FEC Identification Number

C C00666396**Transaction ID : SB23.4396**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STEVE CHABOT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2018

Mailing Address 3030 HARRISON AVE.

City
CINCINNATIState
OHZip Code
45211Purpose of Disbursement
Political Contribution

Candidate Name

CHABOT, STEVE, , ,Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 01

FEC Identification Number

C C00301838**Transaction ID : SB23.4403**

Amount of Each Disbursement this Period

3000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 12

☐ 21b	☐ 22	☒ 23	☐ 26	☐ 27
☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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)

KAYLA'S PAC LIST

Full Name (Last, First, Middle Initial)

A. STIVERS FOR CONGRESS

Mailing Address 4679 WINTERSET DR

City
COLUMBUSState
OHZip Code
43220Purpose of Disbursement
Political Contribution

Candidate Name

STIVERS, STEVE MR., , ,Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 15

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2018

FEC Identification Number

C C00441352**Transaction ID : SB23.4399**

Amount of Each Disbursement this Period

2000.00

☐ 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 M	/	D 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 M	/	D 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)..... ►

2000.00

9000.00