

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 01 / 02 / 2018 through 01 / 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 02 / 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)

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"/>	<input type="text" value="48328.07"/>	<input type="text" value="48328.07"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="48328.07"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="60365.25"/>	<input type="text" value="60365.25"/>
(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="108693.32"/>	<input type="text" value="108693.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="64731.44"/>	<input type="text" value="64731.44"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43961.88"/>	<input type="text" value="43961.88"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="46941.92"/>	

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: 01 / 02 / 2018 To: 01 / 31 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	16460.00	16460.00
(ii) Unitemized	30969.72	30969.72
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	47429.72	47429.72
(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)	47429.72	47429.72
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.).....	12935.53	12935.53
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)).....▶	60365.25	60365.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	60365.25	60365.25

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	36688.27	36688.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	36688.27	36688.27
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)	28043.17	28043.17
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)) ..	64731.44	64731.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64731.44	64731.44

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)	47429.72	47429.72
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47429.72	47429.72
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	36688.27	36688.27
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	36688.27	36688.27

**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 148
	(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"/> 15
<input type="checkbox"/> 12	<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. VARNADO, JIMMIE, W, DR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 426
 City GREENSBURG State LA Zip Code 70441
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 03 / 2018
Transaction ID : A4D6811A0CEA24AD7976
 Amount of Each Receipt this Period 250.00
 Memo Item

B. LAWTON, CHANDLER, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 703 HIXBRIDGE RD
 City WESTPORT State MA Zip Code 02790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AMAZON INC Occupation (for Individual) FULFILLMENT ASSOCIATE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 03 / 2018
Transaction ID : A1AE738BF106A42298F6
 Amount of Each Receipt this Period 250.00
 Memo Item

C. SHAPIRO, LESLIE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 340 E 80TH ST APT 14F
 City NEW YORK State NY Zip Code 10075
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 01 / 11 / 2018
Transaction ID : A146064D54A7F4F17A33
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 148
	<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. MCKEE, ELLSWORTH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8052 GIOVANNI LN
 City OOLTEWAH State TN Zip Code 37363
 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 01 / 16 / 2018
Transaction ID : A590A9CCC151C4382B40
 Amount of Each Receipt this Period 250.00
 Memo Item

B. DUFFEY, DONALD, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2246 GOVERNORS BEND RD SE
 City HUNTSVILLE State AL Zip Code 35801
 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 ▼ 250.00

Date of Receipt 01 / 16 / 2018
Transaction ID : A4496C13880E74C7586C
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DUFFEY, DONALD, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2246 GOVERNORS BEND RD SE
 City HUNTSVILLE State AL Zip Code 35801
 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 ▼ 250.00

Date of Receipt 01 / 16 / 2018
Transaction ID : AF827081A638F412A925
 Amount of Each Receipt this Period 150.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
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 8 OF 148
	<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. RAMOS, MERRIAM, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11254 E CICERO ST
 City MESA State AZ Zip Code 85207
 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 01 / 18 / 2018
Transaction ID : ABD3BB65495824F389B9
 Amount of Each Receipt this Period 250.00
 Memo Item

B. 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
 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 01 / 22 / 2018
Transaction ID : A3FA1E8FA5937460BB37
 Amount of Each Receipt this Period 300.00
 Memo Item

C. 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 ▼ 1000.00

Date of Receipt 01 / 22 / 2018
Transaction ID : A90C16FFA5C98402585E
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1550.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 148
	<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. SCHALLER, ROGER, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8210 LAKESHORE RD
 City BURTCHVILLE State MI Zip Code 48059
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SCHALLER CORP Occupation (for Individual) MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 01 / 22 / 2018
Transaction ID : A92C0B7F818084A5286A
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. 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 ▼ 400.00

Date of Receipt 01 / 22 / 2018
Transaction ID : AFCB57E86C62B4D299DA
 Amount of Each Receipt this Period 200.00
 Memo Item

C. CARKHUFF, DIANE, EDELL, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 915 N PINE AVE
 City OKLAHOMA CITY State OK Zip Code 73130
 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 01 / 22 / 2018
Transaction ID : AC53D3921CB8A4678B19
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 148
	<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. CAILLOUX, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 303 SPRING MILL DR
 City KERRVILLE State TX Zip Code 78028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAILLOUX FOUNDATION Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2018
Transaction ID : A4F55BE881FB34DF990B
 Amount of Each Receipt this Period 250.00
 Memo Item

B. WILSON, JERROLD, D, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 SUMMERALL DR
 City MABANK State TX Zip Code 75156
 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 ▼ 500.00

Date of Receipt 01 / 23 / 2018
Transaction ID : A1FECAFD23EC94EDBA06
 Amount of Each Receipt this Period 500.00
 Memo Item

C. MULLINS, WILLIAM, S, , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 TWIN OAKS PL
 City LAUREL State MS Zip Code 39440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HORTMAN HARLOW LAW Occupation (for Individual) LAWYER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 01 / 23 / 2018
Transaction ID : A1E2F915FFBFF4063ADC
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 148
<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. DRIPPS, WILLIAM, F, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1404 32ND ST
 City LAUREL State MS Zip Code 39440
 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 01 / 23 / 2018
Transaction ID : A61A4823C7D0449F7A05
 Amount of Each Receipt this Period 300.00
 Memo Item

B. RODRIGUEZ, N, , ,
 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 ▼ 1000.00

Date of Receipt 01 / 24 / 2018
Transaction ID : A100BE30F0E994A0CB56
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. BEACH, NED, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 800 LORI DR
 City BOONVILLE State MO Zip Code 65233
 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 01 / 25 / 2018
Transaction ID : A0A3D9588B584446CB16
 Amount of Each Receipt this Period 300.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 148
	<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. 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
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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 ▼
500.00

Date of Receipt
 01 / 25 / 2018
Transaction ID : A8B5D4C63729D475F9DD

Amount of Each Receipt this Period
500.00

Memo Item

B. DEPUE, PAUL, J, MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6764 E HOMER BALTIMORE RD

City HOMER	State NY	Zip Code 13077
---------------	-------------	-------------------

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
 01 / 25 / 2018
Transaction ID : AAD8CB3DD5CFE4A1FB32

Amount of Each Receipt this Period
300.00

Memo Item

C. GARRIOTT, DAVID, K, , MD
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19411 ADKINS FOREST DR

City SPRING	State TX	Zip Code 77379
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 01 / 25 / 2018
Transaction ID : AA0F70CE755F244DD834

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 148
	<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. 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 ▼ 2000.00

Date of Receipt 01 / 26 / 2018
Transaction ID : A21DF1EBAFBB6486F811
 Amount of Each Receipt this Period 2000.00
 Memo Item

B. ZYNDA, STEPHEN, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 69
 City WILLIAMSTON State MI Zip Code 48895
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CARDINAL FABRICATION INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 01 / 26 / 2018
Transaction ID : AB928BCC7ED0E41FB981
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. HUFFMAN, CAROL, K, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2527 COPPER CREEK LN
 City CARROLLTON State TX Zip Code 75006
 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 ▼ 2000.00

Date of Receipt 01 / 29 / 2018
Transaction ID : A083B9BABD0494BC6826
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5500.00
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 148
	<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. 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 ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2018

Transaction ID : A3E28E7F4857D4758B0E

Amount of Each Receipt this Period
500.00

Memo Item

B. 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 ▼
500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		29		2018

Transaction ID : A3FB343510D0D4F7EBF3

Amount of Each Receipt this Period
500.00

Memo Item

C. HUNTER, JAMES, S, MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19330 BEAUFAIN ST

City CORNELIUS	State NC	Zip Code 28031-5531
-------------------	-------------	------------------------

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	/	D D	/	Y Y Y Y
01		29		2018

Transaction ID : AE267519735EB4767902

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1400.00
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 15 OF 148
	<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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
EYESTONE, MAYNARD, M, MR,

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 ▼
410.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		31		2018

Transaction ID : AE57422C969DF4FB7A2C

Amount of Each Receipt this Period
360.00

Memo Item

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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
TOTAL This Period (last page this line number only).....	16460.00

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

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

FOR LINE NUMBER: PAGE 16 OF 148
(check only one)
 11a 11b 11c 12
 13 14 15 16 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 ▼
 12768.86

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2018
Transaction ID : A969F1C2139714CAD9CC
 Amount of Each Receipt this Period
 12768.86
 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

SUBTOTAL of Receipts This Page (optional).....▶	12768.86
TOTAL This Period (last page this line number only).....▶	12768.86

**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. PINKSTON GROUP

Full Name (Last, First, Middle Initial)

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:

Date of Disbursement: 01 / 02 / 2018

FEC Identification Number: C

Transaction ID : B9ED37871E

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. 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: 01 / 05 / 2018

FEC Identification Number: C

Transaction ID : BA3FDA4186

Amount of Each Disbursement this Period: 1000.00

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: 01 / 08 / 2018

FEC Identification Number: C

Transaction ID : BE0EAB459E

Amount of Each Disbursement this Period: 1695.47

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3695.47

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. 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

MM / DD / YYYY
01 / 08 / 2018

FEC Identification Number

C
Transaction ID : **BB720BC0EE**
Amount of Each Disbursement this Period
520.14

Memo Item

Full Name (Last, First, Middle Initial)

B. 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:

Date of Disbursement

MM / DD / YYYY
01 / 08 / 2018

FEC Identification Number

C
Transaction ID : **B77CA54553f**
Amount of Each Disbursement this Period
3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DESERT FOX STRATEGIC COMMUNICATIONS

Mailing Address 5841 E CHARLESTON BLVD
SUITE 230-226

City MT REAGAN State NV Zip Code 89142

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 15 / 2018

FEC Identification Number

C
Transaction ID : **B738466B79i**
Amount of Each Disbursement this Period
1000.00

Memo Item

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

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

520.14

**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. SOUSA, JOHN, P, , IV		Date of Disbursement MM / DD / YYYY 01 / 15 / 2018
Mailing Address 11-C TALCOTT FOREST RD UNIT C		FEC Identification Number C [REDACTED] Transaction ID : BAF0D2852A Amount of Each Disbursement this Period 3500.00
City FARMINGTON	State CT	Zip Code 06032
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. SARACINO, WILLIAM, , ,		Date of Disbursement MM / DD / YYYY 01 / 15 / 2018
Mailing Address 3625 ANGELUS AVE		FEC Identification Number C [REDACTED] Transaction ID : BF23E48547E Amount of Each Disbursement this Period 1500.00
City GLENDALE	State CA	Zip Code 91208
Purpose of Disbursement POLITICAL STRATEGY CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. ATKINSON, MAURICE, , ,		Date of Disbursement MM / DD / YYYY 01 / 15 / 2018
Mailing Address 695 FRIAR TUCK LN		FEC Identification Number C [REDACTED] Transaction ID : BDA42796C4 Amount of Each Disbursement this Period 750.00
City MACON	State GA	Zip Code 31220
Purpose of Disbursement SOCIAL MEDIA CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	5750.00
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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial) A. WILLIAM J. OLSON, P.C.		Date of Disbursement MM / DD / YYYY 01 / 17 / 2018
Mailing Address 370 MAPLE AVENUE WEST SUITE 4		FEC Identification Number C [REDACTED] Transaction ID : B017B2D9A8 Amount of Each Disbursement this Period 1163.75
City VIENNA	State VA	Zip Code 22180-5615
Purpose of Disbursement LEGAL FEES		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PARAMOUNT COMMUNICATIONS		Date of Disbursement MM / DD / YYYY 01 / 22 / 2018
Mailing Address 525-K EAST MARKET STREET SUITE 114		FEC Identification Number C [REDACTED] Transaction ID : BE5FCAC0D4 Amount of Each Disbursement this Period 706.66
City LEESBURG	State VA	Zip Code 20176
Purpose of Disbursement FUNDRAISING EMAIL DISTRIBUTION SERVICE		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. INTERNATIONAL DATA MANAGEMENT, INC.		Date of Disbursement MM / DD / YYYY 01 / 22 / 2018
Mailing Address 3200 WEST MARKET ST. SUITE 302		FEC Identification Number C [REDACTED] Transaction ID : B92F716682I Amount of Each Disbursement this Period 282.51
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement DIRECT MAIL THANK YOU PRINTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2152.92
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)
STARS AND STRIPES FOREVER PAC

Full Name (Last, First, Middle Initial)

A. U.S. POSTMASTER

Mailing Address 4410 BROOKFIELD CORPORATE DR

City CHANTILLY State VA Zip Code 20153

Purpose of Disbursement
POSTAL EXPENSE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : **BF5D968456f**
Amount of Each Disbursement this Period
915.00

Memo Item

Full Name (Last, First, Middle Initial)

B. CAMPAIGN FUNDING DIRECT

Mailing Address 1420 SPRING HILL ROAD, SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
FUNDRAISING DIRECT MAIL CREATIVE

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : **B08E8F40852**
Amount of Each Disbursement this Period
5800.96

Memo Item

Full Name (Last, First, Middle Initial)

C. EBERLE COMMUNICATIONS GROUP

Mailing Address 1420 SPRING HILL ROAD SUITE 490

City MCLEAN State VA Zip Code 22102-3028

Purpose of Disbursement
DIRECT MAIL DATA CENTER

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : **BCCC4DE6C**
Amount of Each Disbursement this Period
5388.06

Memo Item

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

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

12104.02

**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: 01 / 30 / 2018

FEC Identification Number: C
Transaction ID : B2145D736B!
Amount of Each Disbursement this Period: 2750.00

Memo Item

B. 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: 01 / 30 / 2018

FEC Identification Number: C
Transaction ID : BDD1F6168D
Amount of Each Disbursement this Period: 3500.00

Memo Item

C. 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: 01 / 30 / 2018

FEC Identification Number: C
Transaction ID : BEBAA1AF2
Amount of Each Disbursement this Period: 750.00

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 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. FIRST VIRGINIA COMMUNITY BANK

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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2018

FEC Identification Number

C
Transaction ID : BF9D7D867E
Amount of Each Disbursement this Period
728.81

Memo Item

Full Name (Last, First, Middle Initial)

B. CP DIRECT

Mailing Address 4600A BOSTON WAY

City LANHAM State MD Zip Code 20706-4858

Purpose of Disbursement
FUNDRAISING DIRECT MAIL PRINTING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 29 / 2018

FEC Identification Number

C
Transaction ID : B0A56D7630E
Amount of Each Disbursement this Period
75.00

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
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

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)..... ▶

803.81
36526.36

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 OF 148
	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 VALTIM		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period <input type="text" value="902.72"/>	Transaction ID : D40007A266D4B4FA6A5E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="902.72"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period <input type="text" value="1354.09"/>	Transaction ID : D4A50867F94394F2AA1D	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1354.09"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="80.00"/>	Transaction ID : D629CDB1E0A534A5393E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="80.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 25 OF 148
	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 EBERLE COMMUNICATIONS GROUP			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : DC570487721E246268E2	
80.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	80.00	0.00

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

Outstanding Balance Beginning This Period	Transaction ID : D324946E7B4D34D22BFE	
159.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	159.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL CREATIVE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : DAF23FED21F0A489A8BD	
306.32		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	306.32

1) SUBTOTALS This Period This Page (optional)..... ▶	465.32
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 26 OF 148
	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 ZIP MAILING SERVICES, INC.		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period 159.00		Transaction ID : DAA0865A952A84241B43	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 159.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 244.23		Transaction ID : DD54416031CF4433088F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 244.23	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY		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 273.24		Transaction ID : DA8156797FD4D47E8B14	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 273.24	

1) SUBTOTALS This Period This Page (optional)..... ▶	676.47
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 27 OF 148
	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 OMEGA LIST COMPANY			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 <input type="text" value="273.24"/>	Transaction ID : D98A87E4F404B40388DF	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="273.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			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 <input type="text" value="273.24"/>	Transaction ID : DBF7F8685DFCC4322AB7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="273.24"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL CREATIVE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period <input type="text" value="5207.51"/>	Transaction ID : DE7AF940B432046A9805	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5207.51"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5753.99"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 28 OF 148
	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 OMEGA LIST COMPANY			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 4645.05	Transaction ID : D6559BDE95FDC440AB0C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4645.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 244.23	Transaction ID : D26DA05EEE5CC4FA5B7E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 244.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 295.90	Transaction ID : D341301CA40354C00B5E	
Amount Incurred This Period 0.00	Payment This Period 295.90	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	4889.28
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 29 OF 148
	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 CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 295.90	Transaction ID : DB8D9D5CFBE2B498DAE3	
Amount Incurred This Period 0.00	Payment This Period 295.90	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period 2703.03	Transaction ID : DB3A9E4511F0D43FE9F0	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2703.03

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL CREATIVE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 306.32	Transaction ID : D2222F8088593420F9DC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 306.32

1) SUBTOTALS This Period This Page (optional)..... ▶	3009.35
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 30 OF 148
	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 CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 5030.22		Transaction ID : D19BCAB499338444FAC8	
Amount Incurred This Period 0.00	Payment This Period 5030.22	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 80.00		Transaction ID : DE988E54C6E0149888FD	
Amount Incurred This Period 0.00	Payment This Period 80.00	Outstanding Balance at Close of This Period 0.00	

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

Outstanding Balance Beginning This Period 159.00		Transaction ID : D9A011C1828444FDBAD5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 159.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	159.00
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 31 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL CREATIVE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 306.32		Transaction ID : D4FE27CCE97DD469AA86	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 306.32	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 244.23		Transaction ID : DA0FBCA46033F4EB4A1F	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 244.23	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 295.90		Transaction ID : D114C843C5CFE45C9A79	
Amount Incurred This Period 0.00	Payment This Period 295.90	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	550.55
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 32 OF 148
	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 ACTION MAILERS		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 90 COMMERCE DRIVE			
City ASTON	State PA	Zip Code 19014-3201	

Outstanding Balance Beginning This Period 4151.87		Transaction ID : D028535DA69314A7A905	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4151.87	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): EMAIL CREATIVE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 483.53		Transaction ID : DEEABF36B872A426D815	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 483.53	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 52.48		Transaction ID : D4E7E9BCDB66F4648AEA	
Amount Incurred This Period 0.00	Payment This Period 52.48	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....▶	4635.40
2) TOTALS This Period (last page this line number only).....▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) 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 33 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL POSTAGE/MAILHOUSE
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 4401.61	Transaction ID : DBBAF873E56134D09B8A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4401.61

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL CREATIVE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 200.95	Transaction ID : DBDBD293784384EAAB47	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.95

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DED085D8535BB4DB6A66	
Amount Incurred This Period 5.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.60

1) SUBTOTALS This Period This Page (optional)..... ▶	4608.16
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 34 OF 148
	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 CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D3D673C84A57D451BB43	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="21.43"/>	<input type="text" value="0.00"/>	<input type="text" value="21.43"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : D8C1AD21D89F94B55AA1	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="5.60"/>	<input type="text" value="0.00"/>	<input type="text" value="5.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period	Transaction ID : D9AEE012B437C486DB31	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="254.60"/>	<input type="text" value="254.60"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="27.03"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 35 OF 148
	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 EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DADE0E8748AB641F88E8	
Amount Incurred This Period 5.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.60	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL MAILSHOP	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D2DD79692D30F4D23A3C	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D0AEE02F3D65D4B81992	
Amount Incurred This Period 5.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.60	

1) SUBTOTALS This Period This Page (optional)..... ▶	244.92
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 36 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D24ED4F87A1204D2EBAD	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
21.43	0.00	21.43	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : D65645BB8D01C44E4932	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
91.62	0.00	91.62	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period		Transaction ID : D67BC2C0377EF43468B4	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
5.60	0.00	5.60	

1) SUBTOTALS This Period This Page (optional)..... ▶	118.65
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 37 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D1806221455AE4B3B8D5	
Amount Incurred This Period 91.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D2444F67F4C7647879A5	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL CREATIVE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D14EE7A656CEF45E0B4F	
Amount Incurred This Period 21.43	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.43

1) SUBTOTALS This Period This Page (optional)..... ▶	346.77
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 38 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : DD78F75C4ECA742D5BBB	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="21.43"/>	<input type="text" value="0.00"/>	<input type="text" value="21.43"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM		Nature of Debt (Purpose): DIRECT MAIL MAILSHOP	
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : D102E9DB4F6A14FE8885	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="233.72"/>	<input type="text" value="0.00"/>	<input type="text" value="233.72"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D119D60642EF84616A08	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="21.43"/>	<input type="text" value="0.00"/>	<input type="text" value="21.43"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="276.58"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 39 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period	Transaction ID : D3446C5E6DDB54E7088F	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="91.62"/>	<input type="text" value="0.00"/>	<input type="text" value="91.62"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D978F6BDB39654BA5848	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="21.43"/>	<input type="text" value="0.00"/>	<input type="text" value="21.43"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D5A1AEC35559B4A02B8A	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="21.43"/>	<input type="text" value="0.00"/>	<input type="text" value="21.43"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="134.48"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 40 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC0D1925BD35D48D1BBB	
Amount Incurred This Period 91.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DF8B373755A194E1D838	
Amount Incurred This Period 5.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D86B4480771384ACE93A	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72

1) SUBTOTALS This Period This Page (optional)..... ▶	330.94
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 41 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC9FE662DFC7E4CCFA72	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC193719F1A2C4B7E9B9	
Amount Incurred This Period 91.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DB9310EF9F2A249FBB9F	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72

1) SUBTOTALS This Period This Page (optional)..... ▶	559.06
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 42 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : D52E1DCB1A8904F43889	
Amount Incurred This Period <input type="text" value="91.62"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="91.62"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : DE164E5488C1846989B3	
Amount Incurred This Period <input type="text" value="5.60"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5.60"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : D1BE15C2E078A4649BBF	
Amount Incurred This Period <input type="text" value="233.72"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="233.72"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="330.94"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 43 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D76E2D6122FBA4BEB94E	
Amount Incurred This Period 91.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.62

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D6ED99D8511814FFF9FC	
Amount Incurred This Period 21.43	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.43

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D34117548CD5045EB857	
Amount Incurred This Period 5.60	Payment This Period 0.00	Outstanding Balance at Close of This Period 5.60

1) SUBTOTALS This Period This Page (optional)..... ▶	118.65
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 44 OF 148
	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 VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D8BE6D1D177014E7AB95	
Amount Incurred This Period 233.72	Payment This Period 0.00	Outstanding Balance at Close of This Period 233.72

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D67FF41EE6C674855BE6	
Amount Incurred This Period 91.62	Payment This Period 0.00	Outstanding Balance at Close of This Period 91.62

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D5B9791EF48DA41D98AF	
Amount Incurred This Period 21.43	Payment This Period 0.00	Outstanding Balance at Close of This Period 21.43

1) SUBTOTALS This Period This Page (optional)..... ▶	346.77
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 45 OF 148
	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 EBERLE COMMUNICATIONS GROUP			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D37E77B5AAB4C493994A	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="5.60"/>	<input type="text" value="0.00"/>	<input type="text" value="5.60"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : DC4403AF503354A259EC	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="91.62"/>	<input type="text" value="0.00"/>	<input type="text" value="91.62"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor VALTIM			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address P.O. BOX 809 1095 VENTURE DR			
City FOREST	State VA	Zip Code 24551-0809	

Outstanding Balance Beginning This Period		Transaction ID : DE187654453AD494B859	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="233.72"/>	<input type="text" value="0.00"/>	<input type="text" value="233.72"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="330.94"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 46 OF 148
	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 LAMAR			Nature of Debt (Purpose): BILLBOARD ADVERTISEMENT PLACEMENT
Mailing Address 1121 S. BOYLE AVE.			
City LOS ANGELES	State CA	Zip Code 90023-2150	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD9C89376CEDA4706BEF	
Amount Incurred This Period 6790.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6790.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): ONLINE AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD32E6020986844828A6	
Amount Incurred This Period 48.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 48.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D802CA62CF86F471187B	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51

1) SUBTOTALS This Period This Page (optional)..... ▶	6862.75
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 47 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): ONLINE AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : DD9CCEE431C104437BD8	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="48.24"/>	<input type="text" value="0.00"/>	<input type="text" value="48.24"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : DE8439095666C4B9AB00	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="24.51"/>	<input type="text" value="0.00"/>	<input type="text" value="24.51"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): EMAIL DISTRIBUTION	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : DB3AD96536A56499993B	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1.89"/>	<input type="text" value="0.00"/>	<input type="text" value="1.89"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="74.64"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 48 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): ONLINE AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D071EE58BFB0C4A778E5	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
48.24	0.00	48.24	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : D921E802C466840D2922	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1.89	0.00	1.89	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): EMAIL CREATIVE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : DBB2E507B2DEB4D0A9A7	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
48.24	0.00	48.24	

1) SUBTOTALS This Period This Page (optional)..... ▶	98.37
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 49 OF 148
	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 PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : DCB5AFD64215243E3B88	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
24.51	0.00	24.51	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): ONLINE AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : DC2326436223B422D8F5	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
48.24	0.00	48.24	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : D274DD4FC98DB4BC4A68	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1.89	0.00	1.89	

1) SUBTOTALS This Period This Page (optional)..... ▶	74.64
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 50 OF 148
	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 PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : D7B68BA56C1814154847	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
1.89	0.00	1.89	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period		Transaction ID : DEE717DE1BC3246C2BCF	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
24.51	0.00	24.51	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): ONLINE AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D25665D5799954CBE947	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
48.24	0.00	48.24	

1) SUBTOTALS This Period This Page (optional)..... ▶	74.64
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 51 OF 148
	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 PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D884BC5A21A1749BF8E4	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DE16ABEFC88E040F3B8F	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D0E6B299D8AAF4938B42	
Amount Incurred This Period 1.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.89

1) SUBTOTALS This Period This Page (optional)..... ▶	50.91
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 52 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): ONLINE AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D27DDD3BE8A5248FEB16		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="48.24"/>	<input type="text" value="0.00"/>	<input type="text" value="48.24"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period	Transaction ID : DF32276C6C2E743099F8		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1.89"/>	<input type="text" value="0.00"/>	<input type="text" value="1.89"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period	Transaction ID : D5134B310B0144E26B62		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1.89"/>	<input type="text" value="0.00"/>	<input type="text" value="1.89"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="52.02"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 53 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): ONLINE AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D47B5A388D570404F91D	
Amount Incurred This Period 48.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 48.24	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DB49731F4BE534ADD9DE	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS		Nature of Debt (Purpose): ONLINE MAILSHOP	
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D81912A4609A54A88801	
Amount Incurred This Period 1.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.89	

1) SUBTOTALS This Period This Page (optional)..... ▶	74.64
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 54 OF 148
	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 PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DCA878CBFCEA64294B0B	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): ONLINE MAILSHOP
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DA859EDF83FA04DDCA2F	
Amount Incurred This Period 1.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PARAMOUNT COMMUNICATIONS			Nature of Debt (Purpose): EMAIL DISTRIBUTION
Mailing Address 525-K EAST MARKET STREET SUITE 114			
City LEESBURG	State VA	Zip Code 20176	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DD324971A8B794A05BAE	
Amount Incurred This Period 24.51	Payment This Period 0.00	Outstanding Balance at Close of This Period 24.51

1) SUBTOTALS This Period This Page (optional)..... ▶	50.91
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 55 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): ONLINE AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D71FB991EA60C4AE4A52	
Amount Incurred This Period 48.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 48.24	

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

Outstanding Balance Beginning This Period 0.00		Transaction ID : D37F7955FFDA045B7B36	
Amount Incurred This Period 150.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY		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 0.00		Transaction ID : DB3599CB6858D47F8AE3	
Amount Incurred This Period 152.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 152.24	

1) SUBTOTALS This Period This Page (optional)..... ▶	350.48
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 56 OF 148
	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 OMEGA LIST COMPANY			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 : DE3DE2357736D480DBE9	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="152.24"/>	<input type="text" value="0.00"/>	<input type="text" value="152.24"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D653C0DAF988F40E7B5A	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="150.00"/>	<input type="text" value="0.00"/>	<input type="text" value="150.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP MAILING SERVICES, INC.			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period	Transaction ID : DB651DF4FC798463480F	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="150.00"/>	<input type="text" value="0.00"/>	<input type="text" value="150.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="452.24"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 57 OF 148
	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 ZIP MAILING SERVICES, INC.		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D57D407725E0640A79DA	
Amount Incurred This Period 150.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DA286D6ADDF A94DD991C	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DDD6AD5F18B364783928	
Amount Incurred This Period 279.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 279.64	

1) SUBTOTALS This Period This Page (optional)..... ▶	684.90
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 58 OF 148
	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 EBERLE COMMUNICATIONS GROUP			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL ROAD SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D90BBE9D74AB34B42AA6		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="123.15"/>	<input type="text" value="0.00"/>	<input type="text" value="123.15"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period	Transaction ID : D4E996C5C4098483DAD3		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="221.22"/>	<input type="text" value="0.00"/>	<input type="text" value="221.22"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP MAILING SERVICES, INC.			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period	Transaction ID : D53EA9DF51A864C3DA28		
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="150.00"/>	<input type="text" value="0.00"/>	<input type="text" value="150.00"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="494.37"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 59 OF 148
	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 CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period	Transaction ID : D1C7B402AFA88415EB9E	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="255.26"/>	<input type="text" value="0.00"/>	<input type="text" value="255.26"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period	Transaction ID : DB1D73A8778FA460788E	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="221.22"/>	<input type="text" value="0.00"/>	<input type="text" value="221.22"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : D9A12FC4D9FDF43A9880	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="123.15"/>	<input type="text" value="0.00"/>	<input type="text" value="123.15"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="599.63"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 60 OF 148
	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 OMEGA LIST COMPANY			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 : D1866EFE07A48488E9C9	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="152.24"/>	<input type="text" value="0.00"/>	<input type="text" value="152.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : DC0BB6FCCDE92406EBF9	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="123.15"/>	<input type="text" value="0.00"/>	<input type="text" value="123.15"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP MAILING SERVICES, INC.			Nature of Debt (Purpose): DIRECT MAIL MAILSHOP
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period	Transaction ID : DE1118AAC1A25482AB25	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="150.00"/>	<input type="text" value="0.00"/>	<input type="text" value="150.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="425.39"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 61 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D68277CEFFF6C48F889A	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D98C2D02D83F743A0892	
Amount Incurred This Period 123.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D4DE0AF64148A4250B86	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26

1) SUBTOTALS This Period This Page (optional)..... ▶	633.67
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 62 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL CREATIVE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DC9B866A29A834C0EBB2	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DCD7B5B44E805423EB64	
Amount Incurred This Period 123.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DDC3D33A8781E4C49A2B	
Amount Incurred This Period 221.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 221.22

1) SUBTOTALS This Period This Page (optional)..... ▶	599.63
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 63 OF 148
	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 CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period	Transaction ID : D45B297B9127C40B3B21	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="279.64"/>	<input type="text" value="0.00"/>	<input type="text" value="279.64"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL DATA CENTER
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period	Transaction ID : DEC5BD8B371B04ADAA91	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="123.15"/>	<input type="text" value="0.00"/>	<input type="text" value="123.15"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP INC			Nature of Debt (Purpose): DIRECT MAIL PRINTING
Mailing Address 8000 VILLA PARK DR			
City RICHMOND	State VA	Zip Code 23228-6500	

Outstanding Balance Beginning This Period	Transaction ID : D2FFF3E027AB04A12958	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="221.22"/>	<input type="text" value="0.00"/>	<input type="text" value="221.22"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="624.01"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 64 OF 148
	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 EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID : DBF2DF7F43CAE420FB6B	
Amount Incurred This Period 123.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.15	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D150A60BC5B3E4912BB3	
Amount Incurred This Period 221.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 221.22	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D43E5AEFDDDED4463AB2	
Amount Incurred This Period 123.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.15	

1) SUBTOTALS This Period This Page (optional)..... ▶	467.52
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 65 OF 148
	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 COLORTREE GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period		Transaction ID : D4D3ADAF8639442128FE	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="221.22"/>	<input type="text" value="0.00"/>	<input type="text" value="221.22"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period		Transaction ID : DF72EDF44986D4E4DA8A	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="279.64"/>	<input type="text" value="0.00"/>	<input type="text" value="279.64"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period		Transaction ID : D1AD3A6AE1E9749F79F1	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="279.64"/>	<input type="text" value="0.00"/>	<input type="text" value="279.64"/>	

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="780.50"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 66 OF 148
	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 OMEGA LIST COMPANY			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 : D884ACEC69EF040E6BED	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="152.24"/>	<input type="text" value="0.00"/>	<input type="text" value="152.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			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 : DA725793F4A0D4B5D8F7	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="152.24"/>	<input type="text" value="0.00"/>	<input type="text" value="152.24"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D78BA0FB075CE4C3BBC1	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="933.32"/>	<input type="text" value="0.00"/>	<input type="text" value="933.32"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="1237.80"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) 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 67 OF 148
	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period		Transaction ID : D7A3E05D24C5E47CDB79	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
255.26	0.00	255.26	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period		Transaction ID : DDD07E56D467D484F99C	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
221.22	0.00	221.22	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor ZIP MAILING SERVICES, INC.		Nature of Debt (Purpose): DIRECT MAIL MAILSHOP	
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period		Transaction ID : D7DEB1FC3A6624A2B947	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
150.00	0.00	150.00	

1) SUBTOTALS This Period This Page (optional)..... ▶	626.48
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 68 OF 148
	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 CP DIRECT			Nature of Debt (Purpose): DIRECT MAIL MATERIALS
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 0.00	Transaction ID : DA7338295F31F4493B58	
Amount Incurred This Period 279.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 279.64

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : D55A2DF0CD7ED408081B	
Amount Incurred This Period 150.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D2E74645E0C7B4D35824	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26

1) SUBTOTALS This Period This Page (optional)..... ▶	684.90
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 69 OF 148
	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 COLORTREE GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D4509162EDDBA4E63880	
Amount Incurred This Period 221.22	Payment This Period 0.00	Outstanding Balance at Close of This Period 221.22	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY		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 0.00		Transaction ID : D0EA0DD9F7B6044CFB67	
Amount Incurred This Period 152.24	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 CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL PRINTING	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D2B70CD9F46634BBAAA0	
Amount Incurred This Period 279.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 279.64	

1) SUBTOTALS This Period This Page (optional)..... ▶	653.10
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 70 OF 148
	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 CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D873FF63B0F994219968	
Amount Incurred This Period 279.64	Payment This Period 0.00	Outstanding Balance at Close of This Period 279.64	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY		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 0.00		Transaction ID : DD75B34F6EA7F48CBB5E	
Amount Incurred This Period 152.24	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 CAMPAIGN FUNDING DIRECT		Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE	
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D9421910FE55B426BA9F	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26	

1) SUBTOTALS This Period This Page (optional)..... ▶	687.14
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 71 OF 148
	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 CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period		Transaction ID : D2482A02C64FB4EA4BF4	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
279.64	0.00	279.64	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CP DIRECT		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 4600A BOSTON WAY			
City LANHAM	State MD	Zip Code 20706-4858	

Outstanding Balance Beginning This Period		Transaction ID : DBBA07959651944BDA08	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
279.64	0.00	279.64	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL MATERIALS	
Mailing Address 8000 VILLA PARK DRIVE			
City RICHMOND	State VA	Zip Code 23228	

Outstanding Balance Beginning This Period		Transaction ID : D255F1A703B344C17807	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
221.22	0.00	221.22	

1) SUBTOTALS This Period This Page (optional)..... ▶	780.50
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 72 OF 148
	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 ZIP MAILING SERVICES, INC.		Nature of Debt (Purpose): DIRECT MAIL MAILSHOP	
Mailing Address 6304 SHERIFF RD. STE Z			
City LANDOVER	State MD	Zip Code 20785	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D59C32F80DAB241A38B1	
Amount Incurred This Period 150.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 150.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY		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 0.00		Transaction ID : DB633ED2A78024064B6A	
Amount Incurred This Period 152.24	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 EBERLE COMMUNICATIONS GROUP, INC.		Nature of Debt (Purpose): DIRECT MAIL DATA CENTER	
Mailing Address 1420 SPRING HILL RD. #490			
City MCLEAN	State VA	Zip Code 22102	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D6FF1AB3CC9244198AED	
Amount Incurred This Period 123.15	Payment This Period 0.00	Outstanding Balance at Close of This Period 123.15	

1) SUBTOTALS This Period This Page (optional)..... ▶	425.39
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) 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 73 OF 148
	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 CAMPAIGN FUNDING DIRECT			Nature of Debt (Purpose): DIRECT MAIL AGENCY FEE
Mailing Address 1420 SPRING HILL ROAD, SUITE 490			
City MCLEAN	State VA	Zip Code 22102-3028	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D62E36EECC63646F29F2	
Amount Incurred This Period 255.26	Payment This Period 0.00	Outstanding Balance at Close of This Period 255.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			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 0.00	Transaction ID : D2226CE03060D47C3BDB	
Amount Incurred This Period 152.24	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		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	407.50
2) TOTALS This Period (last page this line number only)..... ▶	46941.92
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	46941.92

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 CP DIRECT
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL PRINTING
Category/Type
Date of Public Distribution/Dissemination 11/29/2017
Amount 295.9
Transaction ID : EC76F2AA490BB4049A07
Date of Disbursement or Obligation 01/08/2018

Name of Federal Candidate: BALDWIN, TAMMY, , ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2018
Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 11/29/2017
Amount 80
Transaction ID : E65D4BE390D094C8C96B
Date of Disbursement or Obligation 01/29/2018

Name of Federal Candidate: BALDWIN, TAMMY, , ,
Support Oppose
Office Sought: House Senate State: WI
Disbursement For: Primary General 2018
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 375.90
(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 02/20/2018
Signature

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

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

Full Name of Payee SAVANNA COMMUNICATIONS <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 755 SONNE DRIVE	Amount <input type="text"/>
City ANNAPOLIS State MD Zip Code 21401-7120	Transaction ID : EF15444CE20C34FE6983 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BALDWIN, TAMMY, , , Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: WI
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BALDWIN, TAMMY, , ,	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2880	

Full Name of Payee CAMPAIGN FUNDING DIRECT <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1420 SPRING HILL ROAD, SUITE 490	Amount <input type="text"/>
City MCLEAN State VA Zip Code 22102-3028	Transaction ID : E774985C84268471CAB9 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure DIRECT MAIL AGENCY FEE Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BALDWIN, TAMMY, , , Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate District: _____ State: WI
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BALDWIN, TAMMY, , ,	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3486.97	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 2880.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL 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) 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 EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose
Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 3486.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose
Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 3486.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 3486.97 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 3486.97 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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 02 / 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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 3561.61
Disbursement For: General 2018

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 3561.61
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 3561.61
Disbursement For: 2018 General

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 5676.44
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 COLORTREE GROUP, INC. Memo Item
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 5676.44 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: BALDWIN, TAMMY, , , Support Oppose Office Sought: House Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 5676.44 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 5676.44
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 5676.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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

02 / 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
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 5676.44
Disbursement For: 2018 General

Full Name of Payee ZIP MAILING SERVICES, INC.
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: BALDWIN, TAMMY, , ,
Calendar Year-To-Date Per Election for Office Sought 5676.44
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(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 02 / 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 CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee COLORTREE GROUP, INC.
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: BROWN, SHERROD, , ,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 POSTAGE
Date of Public Distribution/Dissemination 01/10/2018
Amount 254.6
Transaction ID : E34DCB8E67626440AFA
Date of Disbursement or Obligation 01/10/2018

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 MATERIALS
Date of Public Distribution/Dissemination 01/10/2018
Amount 91.62
Transaction ID : E848CC20610E04C67B5F
Date of Disbursement or Obligation

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

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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 02/20/2018

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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(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 02 / 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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: BROWN, SHERROD, , , Support Oppose
Office Sought: House Senate State: OH
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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

02 / 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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, ,

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Date 02 / 20 / 2018

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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 COLORTREE GROUP, INC. Memo Item
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, ,

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Date 02 / 20 / 2018

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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 OMEGA LIST COMPANY Memo Item
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS Memo Item
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, ,

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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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 681.61
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 POSTAGE
Name of Federal Candidate: CASEY, ROBERT P, JR,
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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, ,

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Date 02 / 20 / 2018

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 606.97 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP Category/Type
Name of Federal Candidate: CASEY, ROBERT P, JR, Support Oppose Office Sought: House Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 606.97 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, Signature [Electronically Filed] Date 02 / 20 / 2018

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. Memo Item
Date of Public Distribution/Dissemination 01 / 22 / 2018

Mailing Address 6304 SHERIFF RD. STE Z
Amount 150

City LANDOVER State MD Zip Code 20785
Transaction ID : E432AF25C62BC4B26A44

Purpose of Expenditure DIRECT MAIL MAILSHOP
Category/Type
Date of Disbursement or Obligation

Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA

Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Date of Public Distribution/Dissemination 01 / 22 / 2018

Mailing Address 6304 SHERIFF RD. STE Z
Amount 933.32

City LANDOVER State MD Zip Code 20785
Transaction ID : EFAF7ED333108419FA5E

Purpose of Expenditure DIRECT MAIL POSTAGE
Category/Type
Date of Disbursement or Obligation

Name of Federal Candidate: CASEY, ROBERT P, JR, , Support Oppose
Office Sought: House Senate State: PA

Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 933.32

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , [Electronically Filed]
Signature

Date 02 / 20 / 2018

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 CP DIRECT
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL PRINTING
Category/Type

Date of Public Distribution/Dissemination 11/29/2017
Amount 295.9
Transaction ID : E92DD0E25BE9440718C0
Date of Disbursement or Obligation 01/08/2018

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type

Date of Public Distribution/Dissemination 11/29/2017
Amount 80
Transaction ID : EBDBD50D6A236431D9C;
Date of Disbursement or Obligation 01/29/2018

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 375.90
(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 02/20/2018

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 SAVANNA COMMUNICATIONS
Mailing Address 755 SONNE DRIVE
City ANNAPOLIS State MD Zip Code 21401-7120
Purpose of Expenditure RADIO ADVERTISEMENT PLACEMENT/PRODUCTION
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 6588
Disbursement For: 2018 General

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 7194.97
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 6588.00
(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 02 / 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 EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 7194.97
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 PRINTING
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 7194.97
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , [Electronically Filed] Date 02 / 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 PMT FOR EST FROM 1/10/2018. DIRECT MAIL POSTAGE
Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 254.6
Transaction ID : E25703290928D42C8B9B
Date of Disbursement or Obligation 01 / 10 / 2018

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
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 PRINTING
Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 233.72
Transaction ID : E9F9E4A428C354322BE4
Date of Disbursement or Obligation

Name of Federal Candidate: DONNELLY, JOSEPH, S,
Support Oppose
Office Sought: House Senate State: IN
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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

02 / 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 CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure EMAIL CREATIVE Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 7269.61 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS Memo Item
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 7269.61 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure EMAIL DISTRIBUTION
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 7269.61
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL CREATIVE
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 9384.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 20 / 2018

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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 COLORTREE GROUP INC
Mailing Address 8000 VILLA PARK DR
City RICHMOND State VA Zip Code 23228-6500
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 9384.44
Disbursement For: General 2018

Full Name of Payee CP DIRECT
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 9384.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 20 / 2018

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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 EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 9384.44
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL
Name of Federal Candidate: DONNELLY, JOSEPH, S,
Calendar Year-To-Date Per Election for Office Sought 9384.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 9384.44 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL PRINTING Category/Type
Name of Federal Candidate: DONNELLY, JOSEPH, S, Support Oppose Office Sought: House Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 9384.44 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, , ,

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Date 02 / 20 / 2018

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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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee COLORTREE GROUP, INC.
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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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 CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Date of Public Distribution/Dissemination 01/22/2018
Amount 123.15
Transaction ID : E31EC746D23B74137AFA
Date of Disbursement or Obligation
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: HEITKAMP, HEIDI, ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Date of Public Distribution/Dissemination 01/22/2018
Amount 152.24
Transaction ID : E9CAC79F850494C6EA24
Date of Disbursement or Obligation
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

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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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Date of Public Distribution/Dissemination 01/18/2018
Amount 24.51
Transaction ID : E51F043C327C4491B911
Date of Disbursement or Obligation

Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Support Oppose
Office Sought: House Senate State: ND
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Date of Public Distribution/Dissemination 01/18/2018
Amount 1.89
Transaction ID : E62AC2E0BEDE94CBC98
Date of Disbursement or Obligation

Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Support Oppose
Office Sought: House Senate State: ND
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

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Date 02/20/2018

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 91.62
Transaction ID : EEFC8CBC6F1D2435CB85
Date of Disbursement or Obligation

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: HEITKAMP, HEIDI, , , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 233.72
Transaction ID : E6BD0EC642DEB47EE82
Date of Disbursement or Obligation

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, , ,

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Date

02 / 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 POSTAGE
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: General 2018

Full Name of Payee ZIP MAILING SERVICES, INC.
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: HEITKAMP, HEIDI, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 1187.92
(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 02 / 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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: HEITKAMP, HEIDI, , Support Oppose
Office Sought: House Senate State: ND
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: KAINE, TIMOTHY, MICHAEL, , Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 0
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 295.90
(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.

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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 EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type
Date of Public Distribution/Dissemination 11/29/2017
Amount 80
Transaction ID : E4F390CC738A04C969F6
Date of Disbursement or Obligation 01/29/2018

Name of Federal Candidate: Kaine, Timothy, Michael,
Support Oppose
Office Sought: House Senate State: VA
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Category/Type
Date of Public Distribution/Dissemination 01/10/2018
Amount 21.43
Transaction ID : E15662CA2E206495D9E1
Date of Disbursement or Obligation

Name of Federal Candidate: Kaine, Timothy, Michael,
Support Oppose
Office Sought: House Senate State: VA
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 80.00
(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

02/20/2018

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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 606.97
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 MATERIALS
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, ,

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Date 02 / 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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 233.72
Transaction ID : E11A8CDCB29A647DEAD:
Date of Disbursement or Obligation

Name of Federal Candidate: Kaine, Timothy, Michael, Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 254.6
Transaction ID : EACD1947380AC4B3AAD
Date of Disbursement or Obligation

Name of Federal Candidate: Kaine, Timothy, Michael, Support Oppose
Office Sought: House Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, ,

[Electronically Filed]

Date

02 / 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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, ,

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Date 02 / 20 / 2018

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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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 20 / 2018
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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 COLORTREE GROUP, INC. Memo Item
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: Kaine, Timothy, Michael, Oppose
Office Sought: Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: Kaine, Timothy, Michael, Oppose
Office Sought: Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

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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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: Kaine, Timothy, Michael,
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: Kaine, Timothy, Michael,
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

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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
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee ZIP MAILING SERVICES, INC.
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: Kaine, Timothy, Michael,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(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, ,

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Date 02 / 20 / 2018

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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 CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44

Full Name of Payee COLORTREE GROUP, INC.
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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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 CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: MCCASKILL, CLAIRE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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**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 PARAMOUNT COMMUNICATIONS <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 525-K EAST MARKET STREET SUITE 114	Amount <input type="text"/>
City LEESBURG State VA Zip Code 20176	Transaction ID : E740F89B1189A4A6AAAF Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure ONLINE MAILSHOP Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MCCASKILL, CLAIRE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 681.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee PARAMOUNT COMMUNICATIONS <input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 525-K EAST MARKET STREET SUITE 114	Amount <input type="text"/>
City LEESBURG State VA Zip Code 20176	Transaction ID : E42460103F7F84504865 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure ONLINE MAILSHOP Category/Type <input type="text"/>	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose MCCASKILL, CLAIRE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: <u>MO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 681.61	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	<input type="text"/>
(c) TOTAL 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.

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Date / /

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose
Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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.

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(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.

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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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP Category/Type
Name of Federal Candidate: MCCASKILL, CLAIRE, , , Support Oppose Office Sought: House Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 2796.44 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Name of Federal Candidate: MOORE, ROY, , , Support Oppose Office Sought: House Senate State: AL
Calendar Year-To-Date Per Election for Office Sought 0 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 1354.09
(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.

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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 CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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, , ,

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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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44

Full Name of Payee COLORTREE GROUP, INC.
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 2796.44 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC. Memo Item
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER Category/Type
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 606.97 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: 2018 General

Full Name of Payee OMEGA LIST COMPANY
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: STABENOW, DEBBIE, , ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: 2018 General

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Date of Public Distribution/Dissemination 01/18/2018
Amount 24.51
Transaction ID: E40B66E11DD5247EB8F0
Date of Disbursement or Obligation

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

Full Name of Payee PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Date of Public Distribution/Dissemination 01/18/2018
Amount 1.89
Transaction ID: ED78D58DE5BF54B88A57
Date of Disbursement or Obligation

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 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(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 02 / 20 / 2018
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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 606.97 Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 2796.44 Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(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.

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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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP
Name of Federal Candidate: STABENOW, DEBBIE, , , Support Oppose
Office Sought: House Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CAMPAIGN FUNDING DIRECT Memo Item
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: TESTER, JON, , , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure ONLINE AGENCY FEE
Name of Federal Candidate: TESTER, JON, ,
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: General 2018

Full Name of Payee CAMPAIGN FUNDING DIRECT
Mailing Address 1420 SPRING HILL ROAD, SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL AGENCY FEE
Name of Federal Candidate: TESTER, JON, ,
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 COLORTREE GROUP, INC. Memo Item
Mailing Address 8000 VILLA PARK DRIVE
City RICHMOND State VA Zip Code 23228
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee CP DIRECT Memo Item
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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 02 / 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 EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type

Name of Federal Candidate: TESTER, JON, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee EBERLE COMMUNICATIONS GROUP, INC.
Mailing Address 1420 SPRING HILL RD. #490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL DATA CENTER
Category/Type

Name of Federal Candidate: TESTER, JON, ,
Support Oppose
Office Sought: House Senate State: MT
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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02 / 20 / 2018

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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 OMEGA LIST COMPANY Memo Item
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102
Purpose of Expenditure DIRECT MAIL LIST RENTAL/EXCHANGE
Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee PARAMOUNT COMMUNICATIONS Memo Item
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 681.61
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(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.

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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 PARAMOUNT COMMUNICATIONS
Mailing Address 525-K EAST MARKET STREET SUITE 114
City LEESBURG State VA Zip Code 20176
Purpose of Expenditure ONLINE MAILSHOP
Name of Federal Candidate: TESTER, JON, , ,
Calendar Year-To-Date Per Election for Office Sought 681.61
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 MAILSHOP
Name of Federal Candidate: TESTER, JON, , ,
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL MATERIALS Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 91.62
Transaction ID : E43128212AC3E4C15A66
Date of Disbursement or Obligation

Name of Federal Candidate: TESTER, JON, , , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee VALTIM Memo Item
Mailing Address P.O. BOX 809 1095 VENTURE DR
City FOREST State VA Zip Code 24551-0809
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Date of Public Distribution/Dissemination 01 / 10 / 2018
Amount 254.6
Transaction ID : ECFE56BF1526A429FAF2
Date of Disbursement or Obligation

Name of Federal Candidate: TESTER, JON, , , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 606.97
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 254.60
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL MAILSHOP Category/Type
Date of Public Distribution/Dissemination 01 / 22 / 2018
Amount 150
Transaction ID : E202F7A58F69B4DD8A5B
Date of Disbursement or Obligation

Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

Full Name of Payee ZIP MAILING SERVICES, INC. Memo Item
Mailing Address 6304 SHERIFF RD. STE Z
City LANDOVER State MD Zip Code 20785
Purpose of Expenditure DIRECT MAIL POSTAGE Category/Type
Date of Public Distribution/Dissemination 01 / 22 / 2018
Amount 933.32
Transaction ID : E17595FA553614BDF93C
Date of Disbursement or Obligation

Name of Federal Candidate: TESTER, JON, , Support Oppose
Office Sought: House Senate State: MT
Calendar Year-To-Date Per Election for Office Sought 2796.44
Disbursement For: Primary General 2018 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 933.32
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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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 CP DIRECT
Mailing Address 4600A BOSTON WAY
City LANHAM State MD Zip Code 20706-4858
Purpose of Expenditure DIRECT MAIL PRINTING
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 0
Date of Public Distribution/Dissemination 11 / 29 / 2017
Amount 5030.22
Transaction ID : E1649B6E509F542BEBD3
Date of Disbursement or Obligation 01 / 08 / 2018
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

Full Name of Payee DANIEL CLARK ART
Mailing Address 7141 EGGBORNSVILLE RD
City RIXEYVILLE State VA Zip Code 22737-1722
Purpose of Expenditure BILLBOARD ADVERTISEMENT PRODUCTION
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 7140
Date of Public Distribution/Dissemination 01 / 15 / 2018
Amount 350
Transaction ID : E244A591D857B4ED0831
Date of Disbursement or Obligation 01 / 15 / 2018
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 5380.22
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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Date

02 / 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 EBERLE COMMUNICATIONS GROUP
Mailing Address 1420 SPRING HILL ROAD SUITE 490
City MCLEAN State VA Zip Code 22102-3028
Purpose of Expenditure DIRECT MAIL DATA CENTER
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 7140
Date of Public Distribution/Dissemination 12/08/2017
Amount 52.48
Transaction ID : E8CCEA2599AED4514B5E
Date of Disbursement or Obligation 01/29/2018
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

Full Name of Payee LAMAR
Mailing Address 1121 S. BOYLE AVE.
City LOS ANGELES State CA Zip Code 90023-2150
Purpose of Expenditure BILLBOARD ADVERTISEMENT PLACEMENT
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 7140
Date of Public Distribution/Dissemination 01/15/2018
Amount 6790
Transaction ID : EAA004C04F9A144F1A6F
Date of Disbursement or Obligation
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

(a) SUBTOTAL of Itemized Independent Expenditures 52.48
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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SATTERFIELD, DAVID, , ,

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Date 02/20/2018

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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 POSTAGE
Name of Federal Candidate: WATERS, MAXINE, , ,
Calendar Year-To-Date Per Election for Office Sought 7140
Date of Public Distribution/Dissemination 11 / 10 / 2017
Amount 902.72
Transaction ID : E130CE6F01B994180B3F
Date of Disbursement or Obligation 01 / 22 / 2018
Office Sought: House District: 43 State: CA
Disbursement For: General 2018

Full Name of Payee
Mailing Address
City
State
Zip Code
Purpose of Expenditure
Name of Federal Candidate:
Office Sought:
State:
Calendar Year-To-Date Per Election for Office Sought
Disbursement For:
Other (specify)

Table with 3 rows: (a) SUBTOTAL of Itemized Independent Expenditures 902.72, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 28043.17

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Signature: SATTERFIELD, DAVID, , , Date: 02 / 20 / 2018