

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Team Hill

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="2022"/>		<input type="text" value="45281.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="3663.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="68350.00"/>	<input type="text" value="214699.00"/>
(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="72013.50"/>	<input type="text" value="259980.97"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="61709.18"/>	<input type="text" value="249676.65"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="10304.32"/>	<input type="text" value="10304.32"/>
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="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Team Hill

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27850.00	126000.00
(ii) Unitemized	0.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	27850.00	126200.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10500.00	58499.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	38350.00	184699.00
12. Transfers From Affiliated/Other Party Committees.....	30000.00	30000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	68350.00	214699.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	68350.00	214699.00

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	52010.18	97814.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	52010.18	97814.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	142162.90
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	8700.00	8700.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	999.00	999.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	9699.00	9699.00
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)) ..	61709.18	249676.65
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	61709.18	249676.65

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)	38350.00	184699.00
34. Total Contribution Refunds (from Line 28(d))	9699.00	9699.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28651.00	175000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	52010.18	97814.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	52010.18	97814.75

**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 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Team Hill

A. CROSSLAND, IVAN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 45
 City COLUMBUS State KS Zip Code 66725-0045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSLAND COMPANIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32478
 Amount of Each Receipt this Period 5800.00
 Memo Item
 CONTRIBUTION
 SEE REATTRIBUTION

B. CROSSLAND, BETTY, LOU, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 45
 City COLUMBUS State KS Zip Code 66725-0045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSLAND COMPANIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32598
 Amount of Each Receipt this Period 2900.00
 Memo Item
 CONTRIBUTION
 REATTRIBUTION FROM SPOUSE

C. CROSSLAND, IVAN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 45
 City COLUMBUS State KS Zip Code 66725-0045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CROSSLAND COMPANIES Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32599
 Amount of Each Receipt this Period -2900.00
 Memo Item
 CONTRIBUTION
 REATTRIBUTION TO SPOUSE

SUBTOTAL of Receipts This Page (optional)..... ▶ 5800.00
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 22
	<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)
Team Hill

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. GADE, GILLES, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2022
Mailing Address 27 WASHINGTON AVENUE			Transaction ID : SA11A.33730
City LAWRENCE	State NY	Zip Code 11559-1802	Amount of Each Receipt this Period 2900.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) CROSS RIVER		Occupation (for Individual) PRESIDENT & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2900.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. HITCHCOCK, KELLY, , ,			Date of Receipt MM / DD / YYYY 09 / 30 / 2022
Mailing Address 2509 LESLIE AVENUE			Transaction ID : SA11A.33728
City ALEXANDRIA	State VA	Zip Code 22301-1114	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) INFORMATION REQUESTED PER BEST EFFORTS		Occupation (for Individual) INFORMATION REQUESTED PER BE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. HOHLT, DEBORAH, , MRS.,			Date of Receipt MM / DD / YYYY 08 / 02 / 2022
Mailing Address 7901 KENT RD			Transaction ID : SA11A.32316
City FORT HUNT	State VA	Zip Code 22308-1328	Amount of Each Receipt this Period 2900.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 2900.00	

SUBTOTAL of Receipts This Page (optional).....▶	6300.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Hill

A. HOHLT, RICHARD, F., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7901 KENT RD
 City FORT HUNT State VA Zip Code 22308-1328
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOHLT GROUP Occupation (for Individual) CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 08 / 02 / 2022
Transaction ID : SA11A.32317
 Amount of Each Receipt this Period 2900.00
 Memo Item CONTRIBUTION

B. KLINSKY, STEVEN, BRUCE, MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 787 7TH AVE 49TH FLOOR
 City NEW YORK State NY Zip Code 10019-6018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW MOUNTAIN CAPITAL Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2900.00

Date of Receipt 09 / 19 / 2022
Transaction ID : SA11A.32573
 Amount of Each Receipt this Period 2900.00
 Memo Item CONTRIBUTION

C. ROBERTS, RICHARD, Y., MR.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3916 BENTWOOD COURT
 City FAIRFAX State VA Zip Code 22031-3252
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ROBERTS, RAHEB, & GRADLER LLC Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 09 / 15 / 2022
Transaction ID : SA11A.32549
 Amount of Each Receipt this Period 1000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6800.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 9 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Hill

A. SHACKLEFORD, JAMES, LARRY, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1250 WESLEY AVE
 City FAYETTEVILLE State AR Zip Code 72703-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WASHINGTON REGIONAL Occupation (for Individual) ADMINISTRATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32477
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. CROSSLAND HOLDING COMPANY, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 45
 City COLUMBUS State KS Zip Code 66725-0045
 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 ▼ 0.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32479
 Amount of Each Receipt this Period 2900.00
 Memo Item CONTRIBUTION
 REFUNDED \$2,900.00 ON 09/25/2022

C. CROSSLAND HOLDING COMPANY II, LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX45
 City COLUMBUS State KS Zip Code 66725-0045
 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 ▼ 0.00

Date of Receipt 08 / 26 / 2022
Transaction ID : SA11A.32480
 Amount of Each Receipt this Period 2900.00
 Memo Item CONTRIBUTION
 REFUNDED \$2,900.00 ON 09/25/2022

SUBTOTAL of Receipts This Page (optional)..... ▶ 6050.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 10 OF 22
(check only one)

<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)
Team Hill

A. ROGERS WAREHOUSE DEVELOPMENT, LLC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 45

City COLUMBUS	State KS	Zip Code 66725-0045
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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 ▼
0.00

Date of Receipt
08 / 26 / 2022

Transaction ID : SA11A.32482

Amount of Each Receipt this Period
2900.00

Memo Item
CONTRIBUTION

REFUNDED \$2,900.00 ON 09/25/2022

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	27850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Hill

A. JOHN VALDIVIA FOR MAYOR 2022
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9460 TEGNER RD.

City HILMAR	State CA	Zip Code 95324-9320
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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 ▼
0.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2022

Transaction ID : SA11C.31034

Amount of Each Receipt this Period
999.00

Memo Item
CONTRIBUTION

REFUNDED \$999.00 ON 07/15/2022

B. ARVEST BANK GROUP, INC. PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 799

City LOWELL	State AR	Zip Code 72745-0799
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FEC ID number of contributing federal political committee. **C** C00336768

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2022

Transaction ID : SA11C.32481

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

C. FIRST AMERICAN FINANCIAL CORPORATION PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 FIRST AMERICAN WAY

City SANTA ANA	State CA	Zip Code 92707-5913
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FEC ID number of contributing federal political committee. **C** C00346726

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2022

Transaction ID : SA11C.32296

Amount of Each Receipt this Period
2500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 22
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Team Hill

A. INTERNATIONAL COUNCIL OF SHOPPING CENTERS, INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 555 12TH STREET, N.W.
 SUITE 660
 City WASHINGTON State DC Zip Code 20004-1241
 FEC ID number of contributing federal political committee. **C** C00217638
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 22 / 2022
Transaction ID : SA11C.33609
 Amount of Each Receipt this Period 2000.00
 Memo Item
CONTRIBUTION

B. NOMURA HOLDING AMERICA INC PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1101 PENNSYLVANIA AVE NW
 City WASHINGTON State DC Zip Code 20004-2514
 FEC ID number of contributing federal political committee. **C** C00491951
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 30 / 2022
Transaction ID : SA11C.33729
 Amount of Each Receipt this Period 1000.00
 Memo Item
CONTRIBUTION

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

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	10500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Team Hill

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FRENCH HILL FOR ARKANSAS

Mailing Address P.O. BOX 7841

City LITTLE ROCK State AR Zip Code 72217

FEC ID number of contributing federal political committee. **C** C00551275

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2022

Transaction ID : SA12.16459

Amount of Each Receipt this Period
30000.00

Memo Item
TRANSFER OF FUNDS

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	30000.00
TOTAL This Period (last page this line number only).....▶	30000.00

**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)

Team Hill

Full Name (Last, First, Middle Initial)

A. BENNETT, A. BROOKE , , MRS.,

Date of Disbursement

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

Mailing Address 4511 4TH STREET SOUTH

FEC Identification Number

C []
Transaction ID : SB21B.I1761
 Amount of Each Disbursement this Period
 [] 1185.79

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
SEE MEMO ITEMS

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. AVIS RENT-A-CAR

Date of Disbursement

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

Mailing Address 6 SYLVAN WAY

FEC Identification Number

C []
Transaction ID : SB21B.I1761
 Amount of Each Disbursement this Period
 [] 307.97

City PARSIPPANY State NJ Zip Code 07054

Purpose of Disbursement
JFC TRAVEL EXPENSE

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. BAR HARBOR INN

Date of Disbursement

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

Mailing Address 1 NEWPORT DRIVE

FEC Identification Number

C []
Transaction ID : SB21B.I1761
 Amount of Each Disbursement this Period
 [] 627.42

City BAR HARBOR State ME Zip Code 04609

Purpose of Disbursement
JFC TRAVEL EXPENSE

[]
Category/
Type

Candidate Name

Office Sought: House Senate President
 State: District:

Disbursement For: Primary General Other (specify) ▼

Memo Item

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

[] 1185.79

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)
Team Hill

Full Name (Last, First, Middle Initial)
A. CAMPAIGN MAIL & DATA, INC. DBA CMDI

Date of Disbursement: MM / DD / YYYY
07 / 15 / 2022

Mailing Address: 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: JFC SOFTWARE

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1645I
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CAMPAIGN MAIL & DATA, INC. DBA CMDI

Date of Disbursement: MM / DD / YYYY
08 / 16 / 2022

Mailing Address: 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: JFC SOFTWARE

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1652I
Amount of Each Disbursement this Period: 250.00

Memo Item

Full Name (Last, First, Middle Initial)
C. CAMPAIGN MAIL & DATA, INC. DBA CMDI

Date of Disbursement: MM / DD / YYYY
09 / 14 / 2022

Mailing Address: 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: JFC SOFTWARE

Candidate Name: _____

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

State: _____ District: _____

FEC Identification Number: **C** _____
Transaction ID : SB21B.I1659I
Amount of Each Disbursement this Period: 250.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team Hill

A. MORTGAGE BANKERS ASSOCIATION

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 808 PINEWOOD DR.

M M M	/	D D D	/	Y Y Y Y Y
08		17		2022

City BENTON State AR Zip Code 72019

FEC Identification Number

Purpose of Disbursement
JFC VENUE RENTAL

C

Candidate Name

Transaction ID : SB21B.I1652I
Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

250.00

Memo Item

B. RAISE THE MONEY, INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 26466

M M M	/	D D D	/	Y Y Y Y Y
09		19		2022

City LITTLE ROCK State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement
JFC CC TRANSACTION FEES

C

Candidate Name

Transaction ID : SB21B.I1659I
Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

142.35

Memo Item

C. RAISE THE MONEY, INC.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 26466

M M M	/	D D D	/	Y Y Y Y Y
09		30		2022

City LITTLE ROCK State AR Zip Code 72221

FEC Identification Number

Purpose of Disbursement
JFC CC TRANSACTION FEES

C

Candidate Name

Transaction ID : SB21B.I1764
Amount of Each Disbursement this Period

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

142.35

Memo Item

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

534.70

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

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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)
Team Hill

Full Name (Last, First, Middle Initial)

A. SIMMONS BANK

Mailing Address 501 MAIN STREET

City
PINE BLUFF

State
AR

Zip Code
71601

Purpose of Disbursement
JFC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1639f

Amount of Each Disbursement this Period

2	2	.	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

B. SIMMONS BANK

Mailing Address 501 MAIN STREET

City
PINE BLUFF

State
AR

Zip Code
71601

Purpose of Disbursement
JFC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1647f

Amount of Each Disbursement this Period

2	2	.	0	0
---	---	---	---	---

Memo Item

Full Name (Last, First, Middle Initial)

C. SIMMONS BANK

Mailing Address 501 MAIN STREET

City
PINE BLUFF

State
AR

Zip Code
71601

Purpose of Disbursement
JFC BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1657

Amount of Each Disbursement this Period

2	2	.	0	0
---	---	---	---	---

Memo Item

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

6	6	.	0	0
---	---	---	---	---

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

6	6	.	0	0
---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
Team Hill

Full Name (Last, First, Middle Initial) A. SIMMONS BANK			Date of Disbursement MM / DD / YYYY 09 / 08 / 2022	
Mailing Address 501 MAIN STREET			FEC Identification Number C [REDACTED]	
City PINE BLUFF	State AR	Zip Code 71601	Transaction ID : SB21B.I1658	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type	Amount of Each Disbursement this Period 4605.71	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. LOUISE			Date of Disbursement MM / DD / YYYY 09 / 08 / 2022	
Mailing Address 2205 SOUTHWEST C STREET #100			FEC Identification Number C [REDACTED]	
City BENTONVILLE	State AR	Zip Code 72712	Transaction ID : SB21B.I1773C	
Purpose of Disbursement JFC EVENT CATERING		Category/ Type	Amount of Each Disbursement this Period 3219.37	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. TCM BANK, N.A.			Date of Disbursement MM / DD / YYYY 08 / 25 / 2022	
Mailing Address 3501 EAST FRONTAGE ROAD STE. 200			FEC Identification Number C [REDACTED]	
City TAMPA	State FL	Zip Code 33607	Transaction ID : SB21B.I1652	
Purpose of Disbursement SEE MEMO ITEMS		Category/ Type	Amount of Each Disbursement this Period 1038.00	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5643.71
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)
Team Hill

A. BAR HARBOR INN

Full Name (Last, First, Middle Initial)

Mailing Address 1 NEWPORT DRIVE

City BAR HARBOR State ME Zip Code 04609

Purpose of Disbursement JFC TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 25 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1661i

Amount of Each Disbursement this Period: 1038.00

Memo Item

B. TCM BANK, N.A.

Full Name (Last, First, Middle Initial)

Mailing Address 3501 EAST FRONTAGE ROAD STE. 200

City TAMPA State FL Zip Code 33607

Purpose of Disbursement SEE MEMO ITEMS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1658i

Amount of Each Disbursement this Period: 2100.04

Memo Item

C. CENTRAL FLYING SERVICE, LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1501 BOND AVENUE

City LITTLE ROCK State AR Zip Code 72202

Purpose of Disbursement JFC TRAVEL EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 16 / 2022

FEC Identification Number: C

Transaction ID : SB21B.I1661

Amount of Each Disbursement this Period: 2100.04

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 2100.04

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)

Team Hill

Full Name (Last, First, Middle Initial)

A. THE OORBEEK MEMMOTT GROUP

Mailing Address 1000 NEW JERSEY AVE SE #1016

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1642f

Amount of Each Disbursement this Period

[REDACTED] 24341.47

Memo Item

Full Name (Last, First, Middle Initial)

B. THE OORBEEK MEMMOTT GROUP

Mailing Address 1000 NEW JERSEY AVE SE #1016

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	2	2

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I1763f

Amount of Each Disbursement this Period

[REDACTED] 17388.47

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [REDACTED]

Amount of Each Disbursement this Period

[REDACTED]

Memo Item

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

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

[REDACTED] 41729.94

[REDACTED] 52010.18

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Team Hill

Full Name (Last, First, Middle Initial)
A. CROSSLAND HOLDING COMPANY, LLC

Date of Disbursement: MM / DD / YYYY
09 / 25 / 2022

Mailing Address PO BOX 45

City COLUMBUS State OH Zip Code 66725

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

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

State: District:

FEC Identification Number: **C**
Transaction ID : **SB28A.I1880!**
Amount of Each Disbursement this Period: 2900.00

Memo Item

Full Name (Last, First, Middle Initial)
B. CROSSLAND HOLDING COMPANY II, LLC

Date of Disbursement: MM / DD / YYYY
09 / 25 / 2022

Mailing Address PO BOX 45

City COLUMBUS State KS Zip Code 66725

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

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

State: District:

FEC Identification Number: **C**
Transaction ID : **SB28A.I1881C**
Amount of Each Disbursement this Period: 2900.00

Memo Item

Full Name (Last, First, Middle Initial)
C. ROGERS WAREHOUSE DEVELOPMENT LLC

Date of Disbursement: MM / DD / YYYY
09 / 25 / 2022

Mailing Address PO BOX 45

City COLUMBUS State OH Zip Code 66725

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

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

State: District:

FEC Identification Number: **C**
Transaction ID : **SB28A.I1880**
Amount of Each Disbursement this Period: 2900.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8700.00

TOTAL This Period (last page this line number only)..... ▶ 8700.00

**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 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 checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Team Hill

A. JOHN VALDIVIA FOR MAYOR 2022

Full Name (Last, First, Middle Initial)
Date of Disbursement: 07 / 15 / 2022

Mailing Address 9460 TEGNER ROAD

City HILMAR State CA Zip Code 95324

Purpose of Disbursement CONTRIBUTION REFUND

Candidate Name

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

State: District:

FEC Identification Number: C
Transaction ID : SB28C.I1644!
Amount of Each Disbursement this Period: 999.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	999.00
TOTAL This Period (last page this line number only).....▶	999.00