

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 Association for Firefighters PAC

ADDRESS (number and street) 712 H Street Northeast Washington DC 20002 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00639708 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [ ] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: [X] 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 / 01 / 2019 through 03 / 31 / 2019

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

Signature of Treasurer Kahn, Michael, , , [Electronically Filed] Date 04 / 15 / 2019

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**

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Page 2

Write or Type Committee Name

**Association for Firefighters 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="2019"/>	<input type="text" value="581.08"/>	<input type="text" value="581.08"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="581.08"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7245.00"/>	<input type="text" value="7245.00"/>
(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="7826.08"/>	<input type="text" value="7826.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="6851.16"/>	<input type="text" value="6851.16"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="974.92"/>	<input type="text" value="974.92"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="2000.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="3641.81"/>	

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

**Association for Firefighters PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2340.00	2340.00
(ii) Unitemized .....	4905.00	4905.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7245.00	7245.00
(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) .....	7245.00	7245.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	7245.00	7245.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7245.00	7245.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	6851.16	6851.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6851.16	6851.16
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) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6851.16	6851.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6851.16	6851.16

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7245.00	7245.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7245.00	7245.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6851.16	6851.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6851.16	6851.16

**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)  
**Association for Firefighters PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. Alliance Heating and Air Conditioning**

Mailing Address 23 Brookfield Avenue

City Bridgeport	State CT	Zip Code 06610
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2019

**Transaction ID : A-106586**

Amount of Each Receipt this Period  
 300.00

Memo Item

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

Mailing Address 50 Austin Street

City Bridgeport	State CT	Zip Code 06604
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2019

**Transaction ID : A-106587**

Amount of Each Receipt this Period  
 250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Triple Crown Cabinet & Millwork Corporation**

Mailing Address 12 B Jan Sebastian Drive

City Sandwich	State MA	Zip Code 02563
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 01 / 2019

**Transaction ID : A-106588**

Amount of Each Receipt this Period  
 390.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	940.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 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)  
**Association for Firefighters PAC**

**A. Blackstones Of Southport Inc (Steakhouse)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 181 Main Street  
 City Fairfield State CT Zip Code 06890  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2019  
**Transaction ID : A-106592**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Eb Manufacturing Company, Inc.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 825 Middle Street  
 City Middletown State CT Zip Code 06457  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 15 / 2019  
**Transaction ID : A-106605**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Atlantic Metals and Alloys LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 Benton Street #D  
 City Stratford State CT Zip Code 06615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 01 / 2019  
**Transaction ID : A-106617**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

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

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

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

FOR LINE NUMBER: 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)  
**Association for Firefighters PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. USA Mechanical & Energy Service,LLC**

Mailing Address 15-d International Drive

City East Granby	State CT	Zip Code 06026
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FEC ID number of contributing federal political committee.    **C**

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

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 03 / 18 / 2019

**Transaction ID : A-106630**

Amount of Each Receipt this Period  
 250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. Enfield Transit Mix**

Mailing Address 84 Broad Brook Rd

City Enfield	State CT	Zip Code 06083
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FEC ID number of contributing federal political committee.    **C**

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

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 03 / 22 / 2019

**Transaction ID : A-106634**

Amount of Each Receipt this Period  
 150.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. Gynastics & Cheerleading & Makeup Academy**

Mailing Address 85 Mill Plain Road

City Fairfield	State CT	Zip Code 06824
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FEC ID number of contributing federal political committee.    **C**

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

Receipt For: 2018  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 03 / 27 / 2019

**Transaction ID : A-106635**

Amount of Each Receipt this Period  
 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	650.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2340.00



**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)  
**Association for Firefighters PAC**

**A. Kahn, Michael, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address Suite# 1118

City Washington State DC Zip Code 20002

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 22 / 2019

FEC Identification Number C

Transaction ID : B-101530

Amount of Each Disbursement this Period 40.00

Memo Item

**B. Usps**

Full Name (Last, First, Middle Initial)

Mailing Address 900 Brentwood Road N.E.

City Washington State DC Zip Code 20066-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 01 / 31 / 2019

FEC Identification Number C

Transaction ID : B-101556

Amount of Each Disbursement this Period 13.90

Memo Item

**C. Usps**

Full Name (Last, First, Middle Initial)

Mailing Address 900 Brentwood Road N.E.

City Washington State DC Zip Code 20066-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement 02 / 01 / 2019

FEC Identification Number C

Transaction ID : B-101551

Amount of Each Disbursement this Period 6.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 60.85

**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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial) <b>A. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2019	
Mailing Address 2 Sunnyside Avenue			
City Watertown	State CT	Zip Code 06779	
Purpose of Disbursement Payroll		FEC Identification Number C	
Candidate Name		Transaction ID : B-101500	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 375.00	
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Rubin, Paul, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2019	
Mailing Address 4239 East Flower Street			
City Phoenix	State AZ	Zip Code 85018	
Purpose of Disbursement Payroll		FEC Identification Number C	
Candidate Name		Transaction ID : B-101535	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 234.00	
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2019	
Mailing Address 2 Sunnyside Avenue			
City Watertown	State CT	Zip Code 06779	
Purpose of Disbursement Payroll		FEC Identification Number C	
Candidate Name		Transaction ID : B-101502	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Amount of Each Disbursement this Period 110.00	
Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			

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

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

719.00

**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)  
**Association for Firefighters PAC**

**A. Kahn, Michael, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address Suite# 1118

City Washington State DC Zip Code 20002

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2019

FEC Identification Number: C

Transaction ID : B-101525

Amount of Each Disbursement this Period: 100.00

Memo Item

**B. Kahn, Michael, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address Suite# 1118

City Washington State DC Zip Code 20002

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2019

FEC Identification Number: C

Transaction ID : B-101526

Amount of Each Disbursement this Period: 100.00

Memo Item

**C. Morlando, Anthony, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 2 Sunnyside Avenue

City Watertown State CT Zip Code 06779

Purpose of Disbursement Payroll

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 11 / 2019

FEC Identification Number: C

Transaction ID : B-101503

Amount of Each Disbursement this Period: 422.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 622.00

**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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial)

**A. Adp Realty**

Mailing Address 271 Quassapaug Road

City Woodbury State CT Zip Code 06798

Purpose of Disbursement Rent

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B-101498**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kahn, Michael, , ,**

Mailing Address Suite# 1118

City Washington State DC Zip Code 20002

Purpose of Disbursement Payroll

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B-101523**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Adp Realty**

Mailing Address 271 Quassapaug Road

City Woodbury State CT Zip Code 06798

Purpose of Disbursement Rent

Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : B-101499**  
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial) <b>A. Kahn, Michael, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019	
Mailing Address Suite# 1118		FEC Identification Number C [REDACTED] <b>Transaction ID : B-101531</b> Amount of Each Disbursement this Period 100.00	
City Washington	State DC	Zip Code 20002	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2019	
Mailing Address 2 Sunnyside Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : B-101501</b> Amount of Each Disbursement this Period 450.00	
City Watertown	State CT	Zip Code 06779	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2019	
Mailing Address 2 Sunnyside Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : B-101504</b> Amount of Each Disbursement this Period 225.00	
City Watertown	State CT	Zip Code 06779	Category/ Type 001
Purpose of Disbursement Payroll			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	775.00
<b>TOTAL</b> 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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial) <b>A. Kahn, Michael, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2019
Mailing Address Suite# 1118		FEC Identification Number C <b>Transaction ID : B-101524</b> Amount of Each Disbursement this Period 250.00
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Payroll	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Td Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019
Mailing Address 2 West Main Street		FEC Identification Number C <b>Transaction ID : B-101540</b> Amount of Each Disbursement this Period 85.00
City Waterbury	State CT	
Zip Code 06702	Purpose of Disbursement Remote Deposit Capture Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Td Bank</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2019
Mailing Address 2 West Main Street		FEC Identification Number C <b>Transaction ID : B-101542</b> Amount of Each Disbursement this Period 30.00
City Waterbury	State CT	
Zip Code 06702	Purpose of Disbursement Bank Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	365.00
<b>TOTAL</b> 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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial)

**A. Td Bank**

Mailing Address 2 West Main Street

City Waterbury State CT Zip Code 06702

Purpose of Disbursement  
Bank Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 28 / 2019

FEC Identification Number  
C  
Transaction ID : B-101543  
Amount of Each Disbursement this Period  
10.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Usps**

Mailing Address 900 Brentwood Road N.E.

City Washington State DC Zip Code 20066-9998

Purpose of Disbursement  
Postage

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 01 / 2019

FEC Identification Number  
C  
Transaction ID : B-101552  
Amount of Each Disbursement this Period  
19.35

Memo Item

Full Name (Last, First, Middle Initial)

**C. Integrated Solutions: Political**

Mailing Address 4142 Adams Avenue  
Suite 103-550

City San Diego State CA Zip Code 92116

Purpose of Disbursement  
Cloud Compliance SaaS

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2018  
 Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 04 / 2019

FEC Identification Number  
C  
Transaction ID : B-101516  
Amount of Each Disbursement this Period  
100.00

Memo Item

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

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

129.35

**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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial) <b>A. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2019	
Mailing Address 2 Sunnyside Avenue			
City Watertown	State CT	Zip Code 06779	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C <b>Transaction ID : B-101505</b> Amount of Each Disbursement this Period 435.00 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2019	
Mailing Address 2 Sunnyside Avenue			
City Watertown	State CT	Zip Code 06779	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C <b>Transaction ID : B-101507</b> Amount of Each Disbursement this Period 200.00 <input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Morlando, Anthony, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2019	
Mailing Address 2 Sunnyside Avenue			
City Watertown	State CT	Zip Code 06779	
Purpose of Disbursement Payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	FEC Identification Number C <b>Transaction ID : B-101508</b> Amount of Each Disbursement this Period 127.50 <input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	762.50
<b>TOTAL</b> 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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial)

**A. Td Bank**

Mailing Address 2 West Main Street

City Waterbury State CT Zip Code 06702

Purpose of Disbursement Remote Deposit Capture Fee

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 22 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : B-101541

Amount of Each Disbursement this Period

[REDACTED] 85.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Morlando, Anthony, , ,**

Mailing Address 2 Sunnyside Avenue

City Watertown State CT Zip Code 06779

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 25 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : B-101509

Amount of Each Disbursement this Period

[REDACTED] 375.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Morlando, Anthony, , ,**

Mailing Address 2 Sunnyside Avenue

City Watertown State CT Zip Code 06779

Purpose of Disbursement Payroll

001

Category/Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 28 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : B-101506

Amount of Each Disbursement this Period

[REDACTED] 312.50

Memo Item

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

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

[REDACTED] 772.50

[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)  
**Association for Firefighters PAC**

Full Name (Last, First, Middle Initial)

**A. Td Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2019

Mailing Address 2 West Main Street

FEC Identification Number

C [ ]

**Transaction ID : B-101544**

Amount of Each Disbursement this Period

[ ] 30.00

Memo Item

City Waterbury State CT Zip Code 06702

Purpose of Disbursement  
Bank Fee

[ ] 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Td Bank**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2019

Mailing Address 2 West Main Street

FEC Identification Number

C [ ]

**Transaction ID : B-101545**

Amount of Each Disbursement this Period

[ ] 10.00

Memo Item

City Waterbury State CT Zip Code 06702

Purpose of Disbursement  
Bank Fee

[ ] 001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

City State Zip Code

Purpose of Disbursement

[ ]  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

[ ] 40.00

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

[ ] 4996.20

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

**LOANS**

NAME OF COMMITTEE (In Full) **Association for Firefighters PAC** Transaction ID : C-58997

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>N</b> <input type="checkbox"/> Memo Item Safety Support LLC		Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 50 Waterbury Road Suite#210		
City Prospect	State CT	ZIP Code 06712

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M / M / Y Y Y Y 05 / 27 / 2018	M / M / Y Y Y Y 01 / 01 / 1900	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	2000.00
<b>TOTALS</b> This Period (last page in this line only) .....	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Association for Firefighters PAC** Transaction ID : C-58995

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Safety Support LLC-LOAN MADE		<input checked="" type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 50 Waterbury Road Suite#210			
City Prospect	State CT	ZIP Code 06712	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 04 / 19 / 2018	MM / DD / YYYY 01 / 01 / 1900	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	1000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**LOANS**

NAME OF COMMITTEE (In Full) **Association for Firefighters PAC** Transaction ID : C-58996

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Safety Support LLC-LOAN MADE		<input checked="" type="checkbox"/> Memo Item	Election: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 50 Waterbury Road Suite#210			
City Prospect	State CT	ZIP Code 06712	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY 04 / 26 / 2018	MM / DD / YYYY 01 / 01 / 1900	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	1000.00
<b>TOTALS</b> This Period (last page in this line only) .....	4000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 22
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Association for Firefighters PAC**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Association for Firefighters PAC</b>		Nature of Debt (Purpose): Neopost	
Mailing Address 712 H Street Northeast			
City Washington	State DC	Zip Code 20002	

Outstanding Balance Beginning This Period 0.00		Transaction ID : D-106642	
Amount Incurred This Period 1641.81	Payment This Period 0.00	Outstanding Balance at Close of This Period 1641.81	

B. 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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1641.81
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1641.81
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	4000.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	5641.81