

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

DEFENDERS OF FREEDOM AND SECURITY

ADDRESS (number and street) 8139 SUNSET AVE #130

Check if different than previously reported. (ACC) FAIR OAKS CA 95628

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00536664

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2020 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2020

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

Hornaday, Alexander, , ,

Type or Print Name of Treasurer

Signature of Treasurer Hornaday, Alexander, , , [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

DEFENDERS OF FREEDOM AND SECURITY

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="2020"/>		9740.07
(b) Cash on Hand at Beginning of Reporting Period.....	20347.86	
(c) Total Receipts (from Line 19)	39457.42	84357.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	59805.28	94097.75
7. Total Disbursements (from Line 31).....	33543.86	67836.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	26261.42	26261.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

DEFENDERS OF FREEDOM AND SECURITY

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).....	15996.00	24060.00
(ii) Unitemized	23461.42	60297.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	39457.42	84357.68
(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)	39457.42	84357.68
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)).....▶	39457.42	84357.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	39457.42	84357.68

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	7078.86	20781.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7078.86	20781.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	3750.00
24. Independent Expenditures (use Schedule E)	24465.00	43305.00
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)) ..	33543.86	67836.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33543.86	67836.33

DETAILED SUMMARY PAGE
of Disbursements

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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)	39457.42	84357.68
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	39457.42	84357.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7078.86	20781.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7078.86	20781.33

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 50
	<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	

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)
DEFENDERS OF FREEDOM AND SECURITY

A. Adams, Neil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 BALLANTRAE Cir
 City Cumming State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 25 / 2020
Transaction ID : SA11AI.7960
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

B. Adams, Neil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 BALLANTRAE Cir
 City Cumming State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 27 / 2020
Transaction ID : SA11AI.7961
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Adams, Neil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2530 BALLANTRAE Cir
 City Cumming State GA Zip Code 30041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 30 / 2020
Transaction ID : SA11AI.7962
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 100.00
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 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Anneberg, Spencer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 745 N Corona St
 City Denver State CO Zip Code 80218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 20 / 2020
Transaction ID : SA11AI.8405
 Amount of Each Receipt this Period 300.00
 Memo Item Contribution

B. Arthur, Jim, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16444 53rd PI S
 City Seattle State WA Zip Code 98188
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 18 / 2020
Transaction ID : SA11AI.8725
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Baird, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4281 Express Ln #L3147
 City Sarasota State FL Zip Code 34249
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cesar Ritz Colleges Occupation (for Individual) Admissions Registrar
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 15 / 2020
Transaction ID : SA11AI.8086
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	1350.00
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 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Bell, Catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11812 N 110th St
 City Scottsdale State AZ Zip Code 85259-3045
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2020
Transaction ID : SA11AI.8775
 Amount of Each Receipt this Period
 50.00
 Memo Item Contribution

B. Cooper Jr, J Lewis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 743 Lochmoor Blvd
 City Grosse Pointe Woods State MI Zip Code 48236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) great lakes wine & spirits Occupation (for Individual) board member
 Receipt For: 2020
 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
 09 / 22 / 2020
Transaction ID : SA11AI.8180
 Amount of Each Receipt this Period
 250.00
 Memo Item Contribution

C. Cravens, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1005
 City Refugio State TX Zip Code 78377
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2020
Transaction ID : SA11AI.8379
 Amount of Each Receipt this Period
 550.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	850.00
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 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 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
 08 / 20 / 2020
Transaction ID : SA11AI.8255
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2020
Transaction ID : SA11AI.8256
 Amount of Each Receipt this Period
 50.00
 Memo Item Contribution

C. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2020
Transaction ID : SA11AI.8257
 Amount of Each Receipt this Period
 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	200.00
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 50
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

A. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 09 / 18 / 2020
Transaction ID : SA11AI.8258
 Amount of Each Receipt this Period 100.00
 Memo Item Contribution

B. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 09 / 23 / 2020
Transaction ID : SA11AI.8259
 Amount of Each Receipt this Period 100.00
 Memo Item Contribution

C. Detrixhe, Ed, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1651 N 260 Rd
 City Clyde State KS Zip Code 66938
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self-employed Occupation (for Individual) farmer
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 09 / 23 / 2020
Transaction ID : SA11AI.8260
 Amount of Each Receipt this Period 100.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Detrixhe, Ed, , ,		Date of Receipt MM / DD / YYYY 09 / 23 / 2020
Mailing Address 1651 N 260 Rd		Transaction ID : SA11AI.8261
City Clyde	State KS	Zip Code 66938
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) self-employed	Occupation (for Individual) farmer	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Detrixhe, Ed, , ,		Date of Receipt MM / DD / YYYY 09 / 25 / 2020
Mailing Address 1651 N 260 Rd		Transaction ID : SA11AI.8262
City Clyde	State KS	Zip Code 66938
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer (for Individual) self-employed	Occupation (for Individual) farmer	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 850.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Donahue, James, , ,		Date of Receipt MM / DD / YYYY 09 / 18 / 2020
Mailing Address 44 Cocoonat row a219		Transaction ID : SA11AI.8042
City Palm Beach	State FL	Zip Code 33480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) J b donahue inv	Occupation (for Individual) sales	<input type="checkbox"/> Memo Item Contribution
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional).....▶	400.00
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 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Evans, Charles, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 Auburn Rd
 City Londonderry State NH Zip Code 03053
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Londonderry Self Storage Occupation (for Individual) Self Storage
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2020
Transaction ID : SA11AI.8824
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

B. Fife, Nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10101 N Arabian Trl Unit 1029
 City Scottsdale State AZ Zip Code 85258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2020
Transaction ID : SA11AI.8474
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. FitzHugh, Grayson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6921 GLEN ELLYN Dr
 City Loveland State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2020
Transaction ID : SA11AI.8159
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	550.00
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 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. FitzHugh, Grayson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6921 GLEN ELLYN Dr
 City Loveland State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt 09 / 01 / 2020
Transaction ID : SA11Al.8160
 Amount of Each Receipt this Period 250.00
 Memo Item Contribution

B. FitzHugh, Grayson, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6921 GLEN ELLYN Dr
 City Loveland State OH Zip Code 45140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 09 / 13 / 2020
Transaction ID : SA11Al.8161
 Amount of Each Receipt this Period 100.00
 Memo Item Contribution

C. Hamer, Gregory, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Drawer 3608
 City Morgan City State LA Zip Code 70381
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) B&G Food Enterprises, llc Occupation (for Individual) Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 20 / 2020
Transaction ID : SA11Al.8273
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	1350.00
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 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
juppe, john, , ,

Mailing Address 51 laurelton Ave

City Lake Grove	State NY	Zip Code 11755
--------------------	-------------	-------------------

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

Name of Employer (for Individual) None	Occupation (for Individual) Retired
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 24 / 2020

Transaction ID : SA11AI.7773

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address 6400 N Swede Td

City Northport	State MI	Zip Code 49670
-------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2020

Transaction ID : SA11AI.8187

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

Mailing Address 6400 N Swede Td

City Northport	State MI	Zip Code 49670
-------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2020

Transaction ID : SA11AI.8188

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	250.00
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 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Lewit, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 Kendal Way
 City Sleepy Hollow State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2020
Transaction ID : SA11AI.7768
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

B. Lewit, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3209 Kendal Way
 City Sleepy Hollow State NY Zip Code 10591
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2020
Transaction ID : SA11AI.7769
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Londal, Gerald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 Crooked Tree Dr
 City Petoskey State MI Zip Code 49770
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 03 / 2020
Transaction ID : SA11AI.8191
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 16 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Londal, Gerald, , ,

Mailing Address 818 Crooked Tree Dr

City Petoskey	State MI	Zip Code 49770
------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2020

Transaction ID : SA11AI.8192

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

Mailing Address 818 Crooked Tree Dr

City Petoskey	State MI	Zip Code 49770
------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2020

Transaction ID : SA11AI.8193

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address 818 Crooked Tree Dr

City Petoskey	State MI	Zip Code 49770
------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2020

Transaction ID : SA11AI.8194

Amount of Each Receipt this Period
50.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	200.00
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 17 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
mcatee, john, , ,

Mailing Address 209 banyan Rd

City palm beach	State FL	Zip Code 33480
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 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
09		18		2020

Transaction ID : SA11AI.8046

Amount of Each Receipt this Period
250.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
McPherson, ret, LTC David, , ,

Mailing Address 1303 Evergreen Dr

City Sturgis	State SD	Zip Code 57785
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 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
08		27		2020

Transaction ID : SA11AI.8209

Amount of Each Receipt this Period
250.00

Memo Item Contribution

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

Mailing Address Inverness Dr

City Defiance	State OH	Zip Code 43512
------------------	-------------	-------------------

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

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

Receipt For: 2020
 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
09		21		2020

Transaction ID : SA11AI.8154

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	600.00
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 18 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Narkham, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W 50th Dr
 City golden State CO Zip Code 80403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bounce Inc Occupation (for Individual) CPO
 Receipt For: 2020
 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
 09 / 19 / 2020
Transaction ID : SA11AI.8416
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Contribution

B. Narkham, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15180 W 50th Dr
 City golden State CO Zip Code 80403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bounce Inc Occupation (for Individual) CPO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 26 / 2020
Transaction ID : SA11AI.8417
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Contribution

C. Nodacker, Milton, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 60
 City Peck State ID Zip Code 83545
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 09 / 29 / 2020
Transaction ID : SA11AI.8434
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	600.00
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 19 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. ogden, gene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22657 Cassel Rd PO Bx 22
 City Cassel State CA Zip Code 96016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2020
Transaction ID : SA11AI.8684
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

B. piziali, rita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 Deep Springs Ln
 City Lincoln State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: 2020
 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
 07 / 27 / 2020
Transaction ID : SA11AI.8668
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

C. piziali, rita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 Deep Springs Ln
 City Lincoln State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 17 / 2020
Transaction ID : SA11AI.8670
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 20 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. piziali, rita, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1921 Deep Springs Ln
 City Lincoln State CA Zip Code 95648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) consultant
 Receipt For: 2020
 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
 09 / 22 / 2020
Transaction ID : SA11AI.8674
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

B. Plante, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Spring Cove Rd
 City Narragansett State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.8821
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Plante, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Spring Cove Rd
 City Narragansett State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.8822
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	125.00
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 21 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Plante, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Spring Cove Rd
 City Narragansett State RI Zip Code 02882
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2020
Transaction ID : SA11AI.8823
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

B. Pogodzinski, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 Manitou Pk Dr
 City Minocqua State WI Zip Code 54548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 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
 09 / 25 / 2020
Transaction ID : SA11AI.8199
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Pogodzinski, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 Manitou Pk Dr
 City Minocqua State WI Zip Code 54548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2020
Transaction ID : SA11AI.8200
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	150.00
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 22 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Pogodzinski, Anthony, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9609 Manitou Pk Dr
 City Minocqua State WI Zip Code 54548
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2020
Transaction ID : SA11AI.8201
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Pohlman, Floyd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 Lilia Pl
 City Kapaa State HI Zip Code 96746
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) MD
 Receipt For: 2020
 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
 08 / 07 / 2020
Transaction ID : SA11AI.8687
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

C. Pohlman, Floyd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 Lilia Pl
 City Kapaa State HI Zip Code 96746
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) self Occupation (for Individual) MD
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2020
Transaction ID : SA11AI.8688
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 23 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Pohlman, Floyd, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 188 Lilia Pl
 City Kapaa State HI Zip Code 96746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) MD
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 10 / 2020
Transaction ID : SA11AI.8689
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Portier, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15770 SW Towhee Ln
 City Beaverton State OR Zip Code 97007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) homemaker Occupation (for Individual) homemaker
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 14 / 2020
Transaction ID : SA11AI.8693
 Amount of Each Receipt this Period
 50.00
 Memo Item Contribution

C. Portier, Elaine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15770 SW Towhee Ln
 City Beaverton State OR Zip Code 97007
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) homemaker Occupation (for Individual) homemaker
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2020
Transaction ID : SA11AI.8694
 Amount of Each Receipt this Period
 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	200.00
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 24 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Powers, Richard, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5623 J Riley West Rd

City Greenback	State TN	Zip Code 37742
-------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	25	/	2020

Transaction ID : SA11AI.8119

Amount of Each Receipt this Period
10.00

Memo Item Contribution

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

Mailing Address 5623 J Riley West Rd

City Greenback	State TN	Zip Code 37742
-------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2020

Transaction ID : SA11AI.8120

Amount of Each Receipt this Period
12.00

Memo Item Contribution

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

Mailing Address 5623 J Riley West Rd

City Greenback	State TN	Zip Code 37742
-------------------	-------------	-------------------

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

Name of Employer (for Individual) none	Occupation (for Individual) retired
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2020

Transaction ID : SA11AI.8121

Amount of Each Receipt this Period
12.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	34.00
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 25 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Powers, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5623 J Riley West Rd
 City Greenback State TN Zip Code 37742
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) none Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 244.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 29 / 2020
Transaction ID : SA11AI.8122
 Amount of Each Receipt this Period 12.00
 Memo Item Contribution

B. Quigg, Kandy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1328 Academy Ave
 City Belmont State CA Zip Code 94002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 07 / 07 / 2020
Transaction ID : SA11AI.8628
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Quigg, Kandy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1328 Academy Ave
 City Belmont State CA Zip Code 94002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 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
 09 / 29 / 2020
Transaction ID : SA11AI.8635
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	112.00
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 26 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
redd, damoder, , ,

Mailing Address 68 portuguese Bnd

City rolling hills	State CA	Zip Code 90274
-----------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2020

Transaction ID : SA11AI.8548

Amount of Each Receipt this Period
500.00

Memo Item Contribution

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2020

Transaction ID : SA11AI.8330

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2020

Transaction ID : SA11AI.8331

Amount of Each Receipt this Period
50.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	600.00
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 27 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ricci, lawrence, , ,

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2020

Transaction ID : SA11AI.8332

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2020

Transaction ID : SA11AI.8333

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address box 3803

City san angelo	State TX	Zip Code 76902
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		24		2020

Transaction ID : SA11AI.8334

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	200.00
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 28 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. robertson, Steve, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12080 Kate Dr
 City Los Altos State CA Zip Code 94022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 11 / 2020
Transaction ID : SA11AI.8636
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Rudolph, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2430 N Augusta
 City Flagstaff State AZ Zip Code 86004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2020
Transaction ID : SA11AI.8472
 Amount of Each Receipt this Period
 250.00
 Memo Item Contribution

C. Ryman, Jerry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5174 Calzado
 City laguna Woods State CA Zip Code 92637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 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
 07 / 14 / 2020
Transaction ID : SA11AI.8602
 Amount of Each Receipt this Period
 25.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	375.00
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 29 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 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
 07 / 07 / 2020
Transaction ID : SA11AI.8802
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

B. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 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
 07 / 19 / 2020
Transaction ID : SA11AI.8803
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2020
Transaction ID : SA11AI.8804
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶ 150.00
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 30 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2020
Transaction ID : SA11AI.8805
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

B. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2020
Transaction ID : SA11AI.8806
 Amount of Each Receipt this Period 50.00
 Memo Item Contribution

C. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2020
Transaction ID : SA11AI.8807
 Amount of Each Receipt this Period 25.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	125.00
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 31 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Sciola, Charlotte, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Kimball Ave
 City Wenham State MA Zip Code 01984
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 575.00

Date of Receipt
 08 / 25 / 2020
Transaction ID : SA11AI.8808
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. sinkys, catherine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1207 State Blvd Franklin Tn 37064
 City Franklin State TN Zip Code 37064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 08 / 26 / 2020
Transaction ID : SA11AI.8110
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

C. Sotomayor, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1211 CIN-D Ln
 City Somerset State PA Zip Code 15501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 09 / 02 / 2020
Transaction ID : SA11AI.7795
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	300.00
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 32 OF 50
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
DEFENDERS OF FREEDOM AND SECURITY

A. Sotomayor, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1211 CIN-D Ln
 City Somerset State PA Zip Code 15501
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 28 / 2020
Transaction ID : SA11AI.7796
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Speights, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 Bent Oak Dr
 City Shavano Park State TX Zip Code 78231
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) retired Occupation (for Individual) retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 22 / 2020
Transaction ID : SA11AI.8376
 Amount of Each Receipt this Period
 1000.00
 Memo Item Contribution

C. Stucky, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1804 Firebox
 City Newton State KS Zip Code 67114
 FEC ID number of contributing federal political committee. C
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2020
Transaction ID : SA11AI.8265
 Amount of Each Receipt this Period
 25.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	1125.00
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 33 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sweatt, nancy, , ,

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2020

Transaction ID : SA11AI.8653

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
530.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2020

Transaction ID : SA11AI.8654

Amount of Each Receipt this Period
25.00

Memo Item Contribution

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
580.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		04		2020

Transaction ID : SA11AI.8655

Amount of Each Receipt this Period
50.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	125.00
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 34 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
sweatt, nancy, , ,

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
605.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		07		2020

Transaction ID : SA11AI.8656

Amount of Each Receipt this Period
25.00

Memo Item Contribution

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
655.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2020

Transaction ID : SA11AI.8657

Amount of Each Receipt this Period
50.00

Memo Item Contribution

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

Mailing Address PO Box 3087

City santa cruz	State CA	Zip Code 95063
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
705.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2020

Transaction ID : SA11AI.8658

Amount of Each Receipt this Period
50.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	125.00
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 35 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. sweat, nancy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 3087
 City santa cruz State CA Zip Code 95063
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) self Occupation (for Individual) retatty
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 730.00

Date of Receipt
 09 / 30 / 2020
Transaction ID : SA11AI.8659
 Amount of Each Receipt this Period
 25.00
 Memo Item
 Contribution

B. Szablowski, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address Pob 647
 519 easton road
 City Riegelsville State PA Zip Code 18077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Eracent Occupation (for Individual) Chaitman
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 09 / 23 / 2020
Transaction ID : SA11AI.7835
 Amount of Each Receipt this Period
 250.00
 Memo Item
 Contribution

C. Szambecki, Diana, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5375 Park Dr
 City Vermilion State OH Zip Code 44089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Family, community Occupation (for Individual) Wife, mother,volunteer
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 09 / 20 / 2020
Transaction ID : SA11AI.8156
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 36 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Vargas, Joseph, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2950 Van Horn Rd
 City Fairbanks State AK Zip Code 99709
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Denali Fenceworks, LLC Occupation (for Individual) Contractor
 Receipt For: 2020
 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
 07 / 24 / 2020
Transaction ID : SA11AI.8506
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

B. Ware, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15617 Holly Grove Rd
 City Silver Spring MD State MD Zip Code 20905
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IFC Occupation (for Individual) Owner/Manager
 Receipt For: 2020
 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
 09 / 30 / 2020
Transaction ID : SA11AI.7875
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

C. Watkins, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 804 SW 148th St
 City Burien State WA Zip Code 98166
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Mrs.
 Receipt For: 2020
 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
 09 / 14 / 2020
Transaction ID : SA11AI.8794
 Amount of Each Receipt this Period
 100.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	300.00
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 37 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Webb, Dorothy, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13025 Sky Valley Rd

City Los Angeles	State CA	Zip Code 90049
---------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		10		2020

Transaction ID : SA11AI.8540

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

Mailing Address 13025 Sky Valley Rd

City Los Angeles	State CA	Zip Code 90049
---------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2020

Transaction ID : SA11AI.8541

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

Mailing Address 13025 Sky Valley Rd

City Los Angeles	State CA	Zip Code 90049
---------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2020

Transaction ID : SA11AI.8542

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 38 OF 50
	<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, Carol, , ,

Mailing Address 2197 Sutter View Ln

City Lincoln	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 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
08		25		2020

Transaction ID : SA11AI.8671

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

Mailing Address 2197 Sutter View Ln

City Lincoln	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2020

Transaction ID : SA11AI.8672

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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

Mailing Address 2197 Sutter View Ln

City Lincoln	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2020

Transaction ID : SA11AI.8673

Amount of Each Receipt this Period
100.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	300.00
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 39 OF 50
<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)
DEFENDERS OF FREEDOM AND SECURITY

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wilson, Carol, , ,

Mailing Address 2197 Sutter View Ln

City Lincoln	State CA	Zip Code 95648
-----------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2020

Transaction ID : SA11AI.8675

Amount of Each Receipt this Period
100.00

Memo Item Contribution

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
MM / DD / YYYY

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
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	15996.00

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Moundsprings Strategies

Mailing Address 8208 Foxfire Dr

City Orangevale State CA Zip Code 95662

Purpose of Disbursement
PAC management services

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8863
Amount of Each Disbursement this Period
4240.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7753
Amount of Each Disbursement this Period
139.39

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8889
Amount of Each Disbursement this Period
52.20

Memo Item

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

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

4431.59

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchnt Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8890
Amount of Each Disbursement this Period
184.89

Memo Item

Full Name (Last, First, Middle Initial)

B. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 22 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8891
Amount of Each Disbursement this Period
201.03

Memo Item

Full Name (Last, First, Middle Initial)

C. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8892
Amount of Each Disbursement this Period
228.56

Memo Item

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

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

614.48

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. Paypal

Mailing Address 1122 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement
Merchant Processing Fees

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
09 / 29 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8893
Amount of Each Disbursement this Period
532.79

Memo Item

Full Name (Last, First, Middle Initial)

B. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement
Legal and Compliance

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
07 / 10 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8865
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement
Legal and compliance

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8864
Amount of Each Disbursement this Period
500.00

Memo Item

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

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

1532.79

**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)
DEFENDERS OF FREEDOM AND SECURITY

Full Name (Last, First, Middle Initial)

A. The Law Office of Alexander Hornaday

Mailing Address 1624 Market Street
Ste 202

City Denver State CO Zip Code 80202

Purpose of Disbursement
compliance and legal

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

FEC Identification Number

C
Transaction ID : SB21B.8866
Amount of Each Disbursement this Period
500.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

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

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

500.00
7078.86

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

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)
DEFENDERS OF FREEDOM AND SECURITY

A. bolduc, donald, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 5211

City Manchester State NH Zip Code 03108

Purpose of Disbursement Contribution

Candidate Name **bolduc, donald, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NH District: 00

Date of Disbursement: 08 / 28 / 2020

FEC Identification Number: C S0NH00326

Transaction ID : **SB23.8881**

Amount of Each Disbursement this Period: 500.00

Memo Item

B. FREITAS, NICK J, , ,

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 113

City CULPEPER State VA Zip Code 22701

Purpose of Disbursement contribution

Candidate Name **FREITAS, NICK J, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: VA District: 07

Date of Disbursement: 09 / 02 / 2020

FEC Identification Number: C H0VA07158

Transaction ID : **SB23.8885**

Amount of Each Disbursement this Period: 500.00

Memo Item

C. PARNELL, RICHARD SEAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 232 BENTBROOK CIRCLE

City CRANBERRY TOWNSHIP State PA Zip Code 16066

Purpose of Disbursement contribution

Candidate Name **PARNELL, RICHARD SEAN, , ,**

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: PA District: 17

Date of Disbursement: 07 / 30 / 2020

FEC Identification Number: C H0PA17115

Transaction ID : **SB23.8882**

Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	2000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure content creation Category/Type

Date of Public Distribution/Dissemination
Amount 1575.00
Transaction ID : SE.8867
Date of Disbursement or Obligation 07 / 08 / 2020

Name of Federal Candidate: JAMES, JOHN, ,
Support Oppose

Office Sought: House District: 00
President Senate State: MI

Calendar Year-To-Date Per Election for Office Sought 1575.00

Disbursement For: Primary General 2020
Other (specify)

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure list rental and email send fees Category/Type

Date of Public Distribution/Dissemination
Amount 2430.00
Transaction ID : SE.8868
Date of Disbursement or Obligation 07 / 08 / 2020

Name of Federal Candidate: JAMES, JOHN, ,
Support Oppose

Office Sought: House District: 00
President Senate State: MI

Calendar Year-To-Date Per Election for Office Sought 4005.00

Disbursement For: Primary General 2020
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4005.00
(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.

Hornaday, Alexander, , [Electronically Filed]
Signature

Date 10 / 13 / 2020

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure digital distribution
Name of Federal Candidate: JAMES, JOHN, , Support
Office Sought: Senate State: MI
Calendar Year-To-Date Per Election for Office Sought 5390.00
Disbursement For: General 2020

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure content creation
Name of Federal Candidate: ERNST, JONI K, , Support
Office Sought: Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 1520.00
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 2905.00
(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.

Hornaday, Alexander, , [Electronically Filed] Date 10 / 13 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure list rental and email send fees
Name of Federal Candidate: ERNST, JONI K, , Support
Office Sought: Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 4195.00
Disbursement For: General 2020

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure digital distribution
Name of Federal Candidate: ERNST, JONI K, , Support
Office Sought: Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 5965.00
Disbursement For: General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 4445.00
(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.

Hornaday, Alexander, , [Electronically Filed] Date 10 / 13 / 2020
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies Memo Item

Date of Public Distribution/Dissemination

Mailing Address 8208 Foxfire Dr

Amount 1950.00

City Orangevale State CA Zip Code 95662

Transaction ID: SE.8874 Date of Disbursement or Obligation

Purpose of Expenditure Content creation Category/Type

09 / 14 / 2020

Name of Federal Candidate: JAMES, JOHN, , Support Oppose

Office Sought: House District: 00 President Senate State: MI

Calendar Year-To-Date Per Election for Office Sought 7340.00

Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Moundsprings Strategies Memo Item

Date of Public Distribution/Dissemination

Mailing Address 8208 Foxfire Dr

Amount 2625.00

City Orangevale State CA Zip Code 95662

Transaction ID: SE.8875 Date of Disbursement or Obligation

Purpose of Expenditure list rental and send fees Category/Type

09 / 14 / 2020

Name of Federal Candidate: JAMES, JOHN, , Support Oppose

Office Sought: House District: 00 President Senate State: MI

Calendar Year-To-Date Per Election for Office Sought 9965.00

Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4575.00

(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.

Hornaday, Alexander, ,

[Electronically Filed]

Date 10 / 13 / 2020

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY
FEC IDENTIFICATION NUMBER C C00536664

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure Digital distribution Category/Type

Date of Public Distribution/Dissemination
Amount 1750.00
Transaction ID : SE.8876
Date of Disbursement or Obligation 09 / 14 / 2020

Name of Federal Candidate: JAMES, JOHN, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 11715.00

Office Sought: House District: 00
President Senate State: MI
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Moundsprings Strategies
Mailing Address 8208 Foxfire Dr
City Orangevale State CA Zip Code 95662
Purpose of Expenditure List rental and send fees Category/Type

Date of Public Distribution/Dissemination
Amount 2885.00
Transaction ID : SE.8877
Date of Disbursement or Obligation 09 / 30 / 2020

Name of Federal Candidate: MCSALLY, MARTHA, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 2885.00

Office Sought: House District: 00
President Senate State: AZ
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4635.00
(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.

Hornaday, Alexander, ,
Signature

[Electronically Filed]

Date 10 / 13 / 2020

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

NAME OF COMMITTEE (In Full) DEFENDERS OF FREEDOM AND SECURITY	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00536664 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Moundsprings Strategies		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 8208 Foxfire Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 2150.00 </div>	
City Orangevale	State CA	Zip Code 95662	Transaction ID : SE.8878 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 30 / 2020
Purpose of Expenditure Content creation		Category/Type 	
Name of Federal Candidate: MCSALLY, MARTHA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: AZ	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 5035.00 </div>			

Full Name of Payee <input type="checkbox"/> Memo Item Moundsprings Strategies		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y	
Mailing Address 8208 Foxfire Dr		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 1750.00 </div>	
City Orangevale	State CA	Zip Code 95662	Transaction ID : SE.8879 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 09 / 30 / 2020
Purpose of Expenditure Digital Distribution		Category/Type 	
Name of Federal Candidate: MCSALLY, MARTHA, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: MI	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 13465.00 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 3900.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(c) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 24465.00 </div>

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.

Hornaday, Alexander, , ,

[Electronically Filed]

Date M M / D D / Y Y Y Y Y Y
10 / 13 / 2020

Signature