

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 Building and Restoring the American Dream Fund

ADDRESS (number and street) PO Box 30844 Bethesda MD 20824 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00590356 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report (selected), Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2019 through 06 / 30 / 2019

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

Type or Print Name of Treasurer

Signature of Treasurer Carroll, Robert, E., , CPA [Electronically Filed] Date 07 / 25 / 2019

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Building and Restoring the American Dream Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="12280.77"/>	<input type="text" value="12280.77"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="12280.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="29358.89"/>	<input type="text" value="29358.89"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="41639.66"/>	<input type="text" value="41639.66"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="36714.50"/>	<input type="text" value="36714.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="4925.16"/>	<input type="text" value="4925.16"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Building and Restoring the American Dream Fund

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).....	1000.00	1000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1000.00	1000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	27500.00	27500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	28500.00	28500.00
12. Transfers From Affiliated/Other Party Committees.....	858.89	858.89
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)).....▶	29358.89	29358.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	29358.89	29358.89

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	6814.50	6814.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6814.50	6814.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	27500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	2400.00	2400.00
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)) ..	36714.50	36714.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36714.50	36714.50

DETAILED SUMMARY PAGE
of Disbursements

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)	28500.00	28500.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	28500.00	28500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6814.50	6814.50
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6814.50	6814.50

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 18
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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)
Building and Restoring the American Dream Fund

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Bachman, Nathan, , ,

Mailing Address **7824 Laurel Avenue**

City Cincinnati	State OH	Zip Code 45243
---------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) The Bachman Group	Occupation (for Individual) Financial Advisor/President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
03 / 19 / 2019

Transaction ID : SA11AI.4649

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

A. ABBVIE POLITICAL ACTION COMMITTEE

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

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO	State IL	Zip Code 60064
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FEC ID number of contributing federal political committee. **C** C00536573

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	15	/	2019

Transaction ID : SA11C.4629

Amount of Each Receipt this Period
5000.00

Memo Item

B. GenenPAC

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

Mailing Address 1 DNA WAY

City San Francisco	State CA	Zip Code 94080
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FEC ID number of contributing federal political committee. **C** C00199257

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	01	/	2019

Transaction ID : SA11C.4631

Amount of Each Receipt this Period
5000.00

Memo Item

C. L3 TECHNOLOGIES, INC. PAC

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

Mailing Address 600 THIRD AVENUE

City NEW YORK	State NY	Zip Code 10016
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FEC ID number of contributing federal political committee. **C** C00338087

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2019

Transaction ID : SA11C.4633

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
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 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

A. Massachusetts Mutual Life Insurance Co. PAC (MMPAC)

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

Mailing Address 1295 State Street

City Springfield	State MA	Zip Code 01111
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00118943

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2019

Transaction ID : SA11C.4625

Amount of Each Receipt this Period
2500.00

Memo Item

B. Nationwide Mutual Insurance Co. PAC

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

Mailing Address 1 Nationwide Plaza

City Columbus	State OH	Zip Code 43215
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00076174

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2019

Transaction ID : SA11C.4621

Amount of Each Receipt this Period
5000.00

Memo Item

c. US Oncology Network PAC

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

Mailing Address 10101 Woodloch Forest Drive

City The Woodlands	State TX	Zip Code 77380
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FEC ID number of contributing federal political committee. **C** C00339655

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	25	/	2019

Transaction ID : SA11C.4623

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	27500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 18
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" 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)
Building and Restoring the American Dream Fund

A. Brad Wenstrup Victory Fund
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 30844
 City Bethesda State MD Zip Code 20824
 FEC ID number of contributing federal political committee. **C** C00617480
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 858.89

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 07 / 2019
Transaction ID : SA12.4612
 Amount of Each Receipt this Period
 858.89
 Memo Item
 Transfer of Net Proceeds

B. Ruby, Jeff, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 700 Walnut Street Suite 200
 City Cincinnati State OH Zip Code 45202
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Jeff Ruby's Steakhouses Restaurateur
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2018
Transaction ID : SA12.4614
 Amount of Each Receipt this Period
 2300.00
 Memo Item

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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	858.89
TOTAL This Period (last page this line number only).....▶	858.89

**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)
Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial) A. Ballard Spahr LLP		Date of Disbursement MM / DD / YYYY 04 / 05 / 2019
Mailing Address 1909 K Street NW 12th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4645 Amount of Each Disbursement this Period 1090.00
City Washington	State DC	Zip Code 20006
Purpose of Disbursement PAC Legal Consulting		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Campaign Financial Services		Date of Disbursement MM / DD / YYYY 01 / 18 / 2019
Mailing Address PO Box 30844		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4615 Amount of Each Disbursement this Period 400.00
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement PAC Compliance Consulting		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Campaign Financial Services		Date of Disbursement MM / DD / YYYY 03 / 18 / 2019
Mailing Address PO Box 30844		FEC Identification Number C [REDACTED] Transaction ID : SB21B.4638 Amount of Each Disbursement this Period 400.00
City Bethesda	State MD	Zip Code 20824
Purpose of Disbursement PAC Compliance Consulting		Category/Type 001
Candidate Name		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1890.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City: Bethesda State: MD Zip Code: 20824

Purpose of Disbursement: PAC Compliance Consulting

001
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4637
Amount of Each Disbursement this Period
400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Financial Services

Mailing Address PO Box 30844

City: Bethesda State: MD Zip Code: 20824

Purpose of Disbursement: PAC Compliance Consulting

001
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
03 / 21 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4640
Amount of Each Disbursement this Period
400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Financial Services

Mailing Address PO Box 30844

City: Bethesda State: MD Zip Code: 20824

Purpose of Disbursement: PAC Compliance Consulting

001
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4648
Amount of Each Disbursement this Period
400.00

Memo Item

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

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

1200.00

**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)
Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4652

Amount of Each Disbursement this Period

[REDACTED] 400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Financial Services

Mailing Address PO Box 30844

City Bethesda State MD Zip Code 20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 10 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4662

Amount of Each Disbursement this Period

[REDACTED] 400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Nossaman, LLP

Mailing Address 777 South Figueroa Street
34th Floor

City Los Angeles State CA Zip Code 90017

Purpose of Disbursement
PAC Legal Consulting

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 14 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.4636

Amount of Each Disbursement this Period

[REDACTED] 495.00

Memo Item

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

[REDACTED] 1295.00

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

[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Ohio Fallen Heroes Memorial Golf Invitational

Mailing Address 7516 Johnstown Road

City Mount Vernon State OH Zip Code 43050

Purpose of Disbursement PAC Advertising

001
 002
 003
 004
 005
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 17 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4665
Amount of Each Disbursement this Period
250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Peerless Printing Company

Mailing Address 2250 Gilbert Avenue

City Cincinnati State OH Zip Code 45206

Purpose of Disbursement PAC Printing

001
 002
 003
 004
 005
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 29 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4618
Amount of Each Disbursement this Period
374.50

Memo Item

Full Name (Last, First, Middle Initial)

C. Ruah Woods

Mailing Address 6675 Wesselman Road

City Cincinnati State OH Zip Code 45248

Purpose of Disbursement PAC Program Expense

001
 002
 003
 004
 005
Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 08 / 2019

FEC Identification Number

C
Transaction ID : SB21B.4626
Amount of Each Disbursement this Period
500.00

Memo Item

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

1124.50

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4635
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4639
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati State OH Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.4651
Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial) A. Wuellner, Maggie, , ,		Date of Disbursement MM / DD / YYYY 05 / 20 / 2019	
Mailing Address 3422 Custer Street		FEC Identification Number C [] Transaction ID : SB21B.4654	
City Cincinnati	State OH	Zip Code 45208	Amount of Each Disbursement this Period [] 300.00
Purpose of Disbursement PAC Fundraising Consulting		Category/Type 003	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Wuellner, Maggie, , ,		Date of Disbursement MM / DD / YYYY 06 / 19 / 2019	
Mailing Address 3422 Custer Street		FEC Identification Number C [] Transaction ID : SB21B.4667	
City Cincinnati	State OH	Zip Code 45208	Amount of Each Disbursement this Period [] 300.00
Purpose of Disbursement PAC Fundraising Consulting		Category/Type 003	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/Type []	Memo Item <input type="checkbox"/>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 600.00
TOTAL This Period (last page this line number only).....▶	[] 7309.50

**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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Bishop for Congress

Mailing Address 2216 Whilden Ct

City Charlotte State NC Zip Code 28211

Purpose of Disbursement
PAC Political Contribution

011

Category/
Type

Candidate Name
Bishop, James, Daniel, ,

Office Sought: House Senate President
Disbursement For: 2019
 Primary General
 Other (specify) Special-General

State: NC District: 09

Date of Disbursement

MM / DD / YYYY
06 / 25 / 2019

FEC Identification Number

C00699660

Transaction ID : SB23.4668

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MICHAEL WALTZ FOR CONGRESS

Mailing Address 437 OCEAN GROVE CIRCLE

City ST AUGUSTINE State FL Zip Code 32080

Purpose of Disbursement
PAC Political Contribution

011

Category/
Type

Candidate Name
WALTZ, MICHAEL, , ,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify)

State: FL District: 06

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C00666396

Transaction ID : SB23.4642

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. National Republican Congressional Committee (NRCC)

Mailing Address 320 First Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
PAC Political Contribution

011

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C00075820

Transaction ID : SB23.4643

Amount of Each Disbursement this Period

25000.00

Memo Item

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

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

26500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

A. Portman for Senate Committee

Full Name (Last, First, Middle Initial)
Mailing Address 9856 Archer Lane

City Dublin State OH Zip Code 43017

Purpose of Disbursement PAC Political Contribution

Candidate Name **Portman, Rob, , ,**

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify) ▼

State: OH District:

Date of Disbursement: 05 / 10 / 2019

FEC Identification Number: C00458463
Transaction ID : SB23.4653

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	27500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Building and Restoring the American Dream Fund

A. Committee to Elect Kristie Dukes Davis

Full Name (Last, First, Middle Initial)

Mailing Address 855 North Hill Lane

City Cincinnati State OH Zip Code 45224

Purpose of Disbursement PAC State Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 05 / 31 / 2019

FEC Identification Number C

Transaction ID : SB29.4661

Amount of Each Disbursement this Period 250.00

Memo Item

B. LaRose for Ohio

Full Name (Last, First, Middle Initial)

Mailing Address 211 South Fifth Street

City Columbus State OH Zip Code 43214

Purpose of Disbursement PAC State Political Contribution

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 02 / 15 / 2019

FEC Identification Number C

Transaction ID : SB29.4657

Amount of Each Disbursement this Period 2000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2250.00
TOTAL This Period (last page this line number only).....▶	2250.00