

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 TEA PARTY MAJORITY FUND

ADDRESS (number and street) 2776 S ARLINGTON MILL DR #806 ARLINGTON VA 22206

2. FEC IDENTIFICATION NUMBER C C00566174 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 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 / 01 / 2017 through 12 / 31 / 2017

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

Type or Print Name of Treasurer Signature of Treasurer MACKENZIE, SCOTT B, , , [Electronically Filed] Date 01 / 17 / 2018

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

TEA PARTY MAJORITY 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="2017"/>	<input type="text" value="12237.51"/>	<input type="text" value="12237.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="34097.96"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="432455.68"/>	<input type="text" value="1053224.59"/>
(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="466553.64"/>	<input type="text" value="1065462.10"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="385415.86"/>	<input type="text" value="984324.32"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="81137.78"/>	<input type="text" value="81137.78"/>
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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TEA PARTY MAJORITY FUND

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 / 01 / 2017 To: M M / D D / Y Y Y Y Y Y
12 / 31 / 2017

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).....	95817.98	145460.98
(ii) Unitemized	336387.70	907513.61
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	432205.68	1052974.59
(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)	432205.68	1052974.59
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).....	250.00	250.00
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)).....▶	432455.68	1053224.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	432455.68	1053224.59

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	91227.68	231915.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	91227.68	231915.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1600.00	1600.00
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).....	292588.18	750808.38
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)) ..	385415.86	984324.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	385415.86	984324.32

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)	432205.68	1052974.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	432205.68	1052974.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	91227.68	231915.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	250.00	250.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	90977.68	231665.94

**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 274
	<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)
TEA PARTY MAJORITY FUND

A. ABBO 531, KATHERINE, , MS,
Mailing Address 7415 2ND AVE

City KENOSHA	State WI	Zip Code 53143
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) UNITED HOSPITAL		Occupation (for Individual) MEDICAL
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
08 / 24 / 2017
Transaction ID : SA11AI.29262

Amount of Each Receipt this Period
100.00

Memo Item

B. ADAMS 366, MARGARET T, , MRS,
Mailing Address 8240 HEALY DR

City MOBILE	State AL	Zip Code 36695
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
09 / 04 / 2017
Transaction ID : SA11AI.31446

Amount of Each Receipt this Period
100.00

Memo Item

C. AHEARN 103, MARY E, , MS,
Mailing Address 179 BENTON AVE

City STATEN ISLAND	State NY	Zip Code 10305
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) NOT EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 205.00

Date of Receipt
12 / 20 / 2017
Transaction ID : SA11AI.31485

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. ALBERT 940, JERROLD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2503 PARK RD

City REDWOOD CITY	State CA	Zip Code 94062
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ALTOS REPROGRAPHICS	Occupation (for Individual) RETAILER
--	---

Receipt For:
 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
07		27		2017

Transaction ID : SA11AI.31493

Amount of Each Receipt this Period
100.00

Memo Item

B. ALEXANDER 431, CARL A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5160 DURRETT RD

City ORIENT	State OH	Zip Code 43146
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
555.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

Transaction ID : SA11AI.31512

Amount of Each Receipt this Period
205.00

Memo Item

C. ALFANO 105, ANNA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 MOSEMAN AVE

City KATONAH	State NY	Zip Code 10536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEMENS HEALTHCARE	Occupation (for Individual) MANAGER
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Receipt For:
 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
07		27		2017

Transaction ID : SA11AI.31525

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	505.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ALFANO 105, ANNA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 73 MOSEMAN AVE

City KATONAH	State NY	Zip Code 10536
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIEMENS HEALTHCARE	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	26	/	2017

Transaction ID : SA11AI.31526

Amount of Each Receipt this Period
150.00

Memo Item

B. ALLEN 134, TOM T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3913 CIRCLE DR

City ONEIDA	State NY	Zip Code 13421
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ONADOGA COUNTY	Occupation (for Individual) ADMINISTRATOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	07	/	2017

Transaction ID : SA11AI.31542

Amount of Each Receipt this Period
2.50

Memo Item

C. ANDERSON 945, LINDA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33473 CALIBAN DR

City FREMONT	State CA	Zip Code 94555
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2017

Transaction ID : SA11AI.29226

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	257.50
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 9 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ANGLE 245, WALLACE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 209 BELAIRE DR
 City DANVILLE State VA Zip Code 24541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2017
Transaction ID : SA11AI.29244
 Amount of Each Receipt this Period 200.00
 Memo Item

B. ARLEDGE 769, CAROL A, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5735 ALLEN RD
 City CHRISTOVAL State TX Zip Code 76935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 08 / 2017
Transaction ID : SA11AI.29306
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ARRINGTON 775, JOE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4825 COUNTY ROAD 197
 City ALVIN State TX Zip Code 77511
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) NOT EMPLOYED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 21 / 2017
Transaction ID : SA11AI.29342
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)	PAGE 10 OF 274
<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ASSMAN 692, CHRIS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 28698 SAGE RD

City VALENTINE	State NE	Zip Code 69201
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) AB INVESTIGATIONS	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2017

Transaction ID : SA11AI.29357

Amount of Each Receipt this Period
100.00

Memo Item

B. ATKINS 367, BOBBIE J, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 809 2ND ST

City GREENSBORO	State AL	Zip Code 36744
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2017

Transaction ID : SA11AI.29364

Amount of Each Receipt this Period
100.00

Memo Item

C. ATKINS 367, BOBBIE J, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 809 2ND ST

City GREENSBORO	State AL	Zip Code 36744
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
12 / 08 / 2017

Transaction ID : SA11AI.29365

Amount of Each Receipt this Period
100.00

Memo Item

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 274
	<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)
TEA PARTY MAJORITY FUND

A. ATKINSON 844, MIKE, , MR,
Mailing Address 2488 S 3500 W

City OGDEN	State UT	Zip Code 84401
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
09 / 20 / 2017
Transaction ID : SA11AI.29370

Amount of Each Receipt this Period
105.00

Memo Item

B. ATKINSON 844, MIKE, , MR,
Mailing Address 2488 S 3500 W

City OGDEN	State UT	Zip Code 84401
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Date of Receipt
12 / 20 / 2017
Transaction ID : SA11AI.29371

Amount of Each Receipt this Period
50.00

Memo Item

C. BARFIELD 775, SHERRIE A, , ,
Mailing Address 2106 N PALM CT

City PASADENA	State TX	Zip Code 77502
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
07 / 24 / 2017
Transaction ID : SA11AI.29542

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BARFIELD 775, SHERRIE A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2106 N PALM CT
 City PASADENA State TX Zip Code 77502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 23 / 2017
Transaction ID : SA11AI.29543
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BARFIELD 775, SHERRIE A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2106 N PALM CT
 City PASADENA State TX Zip Code 77502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 30 / 2017
Transaction ID : SA11AI.29544
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARKER 512, KENNETH L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 602 S 8TH AVE
 City ROCK RAPIDS State IA Zip Code 51246
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 11 / 2017
Transaction ID : SA11AI.29553
 Amount of Each Receipt this Period 100.00
 Memo Item

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 13 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. BARRY 337, CYNTHIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10366 OAK LEAF ST
 City LARGO State FL Zip Code 33774
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 20 / 2017
Transaction ID : SA11AI.29608
 Amount of Each Receipt this Period 40.00
 Memo Item

B. BARTLEY 773, ROBERT C, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10107 ELDERBERRY PARK LN
 City TOMBALL State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 17 / 2017
Transaction ID : SA11AI.29617
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARTLEY 773, ROBERT C, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10107 ELDERBERRY PARK LN
 City TOMBALL State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 09 / 04 / 2017
Transaction ID : SA11AI.29618
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	240.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BARTLEY 773, ROBERT C., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10107 ELDERBERRY PARK LN
 City TOMBALL State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 10 / 02 / 2017
Transaction ID : SA11AI.29619
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BARTLEY 773, ROBERT C., MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10107 ELDERBERRY PARK LN
 City TOMBALL State TX Zip Code 77375
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 04 / 2017
Transaction ID : SA11AI.29620
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BARTLITT 801, JANA K., MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 604 CLIFFGATE LN
 City CASTLE ROCK State CO Zip Code 80108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BOARDS OF BUSINESS Occupation (for Individual) SALES
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 07 / 28 / 2017
Transaction ID : SA11AI.29621
 Amount of Each Receipt this Period 550.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. BARTOLETTI 121, ELIZABETH A, , MS,
Mailing Address 11 CARDONA CT

City WESTERLO	State NY	Zip Code 12193
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 12 / 2017
Transaction ID : SA11AI.29623

Amount of Each Receipt this Period
100.00

Memo Item

B. BECHTLER 240, SHARON, , MS,
Mailing Address 3157 NORTHFORK RD

City ELLISTON	State VA	Zip Code 24087
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GENERAL ELECTRIC		Occupation (for Individual) LABORER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 425.00

Date of Receipt
09 / 11 / 2017
Transaction ID : SA11AI.29718

Amount of Each Receipt this Period
250.00

Memo Item

C. BECKER 119, LLOYD, , MR,
Mailing Address PO BOX 841

City AQUEBOGUE	State NY	Zip Code 11931
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
07 / 03 / 2017
Transaction ID : SA11AI.29729

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BEERS 163, HAROLD J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12341 N PERRY RD
 City TITUSVILLE State PA Zip Code 16354
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 15 / 2017
Transaction ID : SA11AI.29750
 Amount of Each Receipt this Period 105.00
 Memo Item

B. BEHANNA 208, VERNON P, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 429 RITCHIE PKWY
 City ROCKVILLE State MD Zip Code 20852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 10 / 30 / 2017
Transaction ID : SA11AI.29758
 Amount of Each Receipt this Period 205.00
 Memo Item

C. BEISHEIM 105, SUSAN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 50 TRUESDALE LAKE DR
 City SOUTH SALEM State NY Zip Code 10590
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 13 / 2017
Transaction ID : SA11AI.29768
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BELL 630, FRED G, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1922 BERTHOUD PASS CT

City BALLWIN	State MO	Zip Code 63011
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12	/	22	/	2017

Transaction ID : SA11AI.29785

Amount of Each Receipt this Period
75.00

Memo Item

B. BELLAMY 925, DON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4891 RIVERVIEW DR

City RIVERSIDE	State CA	Zip Code 92509
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	01	/	2017

Transaction ID : SA11AI.29791

Amount of Each Receipt this Period
305.00

Memo Item

C. BENJAMIN 800, DEAN A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10118 GROVE LOOP
UNIT A

City WESTMINSTER	State CO	Zip Code 80031
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	13	/	2017

Transaction ID : SA11AI.29805

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	480.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BENJAMIN 800, DEAN A, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10118 GROVE LOOP
 UNIT A
 City WESTMINSTER State CO Zip Code 80031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 12 / 13 / 2017
Transaction ID : SA11AI.29806
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BENSON 190, RICHARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 TERWOOD RD
 APT E53
 City WILLOW GROVE State PA Zip Code 19090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 2017
Transaction ID : SA11AI.29828
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BENSON 190, RICHARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3100 TERWOOD RD
 APT E53
 City WILLOW GROVE State PA Zip Code 19090
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 11 / 06 / 2017
Transaction ID : SA11AI.29829
 Amount of Each Receipt this Period
 100.00
 Memo Item

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 19 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. BENYO 856, ANDREW D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11125 W COPPER FIELD ST
 City MARANA State AZ Zip Code 85658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 05 / 2017
Transaction ID : SA11AI.29844
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. BENYO 856, ANDREW D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11125 W COPPER FIELD ST
 City MARANA State AZ Zip Code 85658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 25 / 2017
Transaction ID : SA11AI.29845
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BENYO 856, ANDREW D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11125 W COPPER FIELD ST
 City MARANA State AZ Zip Code 85658
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 10 / 05 / 2017
Transaction ID : SA11AI.29846
 Amount of Each Receipt this Period
 50.00
 Memo Item

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:	PAGE 20 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. BERGEN 973, KARL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 595 NW DENTON AVE
 City DALLAS State OR Zip Code 97338
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERGEN CONSTRUCTION INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 27 / 2017**
Transaction ID : SA11AI.29862
 Amount of Each Receipt this Period 350.00
 Memo Item

B. BERGMAN 631, JAN F, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7356 CORNELL AVE
 City SAINT LOUIS State MO Zip Code 63130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **08 / 17 / 2017**
Transaction ID : SA11AI.29871
 Amount of Each Receipt this Period 150.00
 Memo Item

C. BERGMAN 631, JAN F, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7356 CORNELL AVE
 City SAINT LOUIS State MO Zip Code 63130
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **10 / 10 / 2017**
Transaction ID : SA11AI.29872
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 21 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. BERRY 112, YVONNE R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 VAN SICLEN AVE
 APT 5J
 City BROOKLYN State NY Zip Code 11207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 07 / 24 / 2017
Transaction ID : SA11AI.29894
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BERRY 112, YVONNE R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1019 VAN SICLEN AVE
 APT 5J
 City BROOKLYN State NY Zip Code 11207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 18 / 2017
Transaction ID : SA11AI.29895
 Amount of Each Receipt this Period 125.00
 Memo Item

C. BERRY 920, MICHAEL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3806 VIA PASATIEMPO
 City RANCHO SANTA FE State CA Zip Code 92091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2017
Transaction ID : SA11AI.29902
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 22 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. BEST 773, VICTORIA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 MOSSY OAKS RD E

City SPRING	State TX	Zip Code 77389
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		21		2017

Transaction ID : SA11AI.29921

Amount of Each Receipt this Period
100.00

Memo Item

B. BEST 773, VICTORIA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 MOSSY OAKS RD E

City SPRING	State TX	Zip Code 77389
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		23		2017

Transaction ID : SA11AI.29922

Amount of Each Receipt this Period
100.00

Memo Item

C. BEST 838, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 PARK DR

City SAINT MARIES	State ID	Zip Code 83861
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		14		2017

Transaction ID : SA11AI.29924

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BICE 575, DONALD L, , MR,
Mailing Address 31629 277TH ST

City WINNER	State SD	Zip Code 57580
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2017
Transaction ID : SA11AI.29957

Amount of Each Receipt this Period
100.00

Memo Item

B. BIEKER 312, DENNIS, , MR,
Mailing Address 1458 BERKSHIRE DR

City MACON	State GA	Zip Code 31206
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) GA STATE BOWLING ASSN		Occupation (for Individual) SECRETARY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 355.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2017
Transaction ID : SA11AI.29965

Amount of Each Receipt this Period
255.00

Memo Item

C. BILLMAN 705, J GAYE, , ,
Mailing Address 1706 WALNUT ST

City NEW IBERIA	State LA	Zip Code 70560
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017
Transaction ID : SA11AI.29980

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BILLMAN 705, J GAYE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1706 WALNUT ST
 City NEW IBERIA State LA Zip Code 70560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2017
Transaction ID : SA11AI.29981
 Amount of Each Receipt this Period 25.00
 Memo Item

B. BINGAMAN 178, MAX, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 247
 City KREAMER State PA Zip Code 17833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BINGAMAN & SON LUMBER Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 15 / 2017
Transaction ID : SA11AI.29988
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BISANGWA 114, ALEXIS, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8920 LYMAN ST
 City QUEENS VILLAGE State NY Zip Code 11428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) FLASHING HOSPITAL MED Occupation (for Individual) MEDICAL
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2017
Transaction ID : SA11AI.30000
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 274
	<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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. BISANGWA 114, ALEXIS, , MS,		Date of Receipt
Mailing Address 8920 LYMAN ST		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City	State	Transaction ID : SA11AI.30001
QUEENS VILLAGE	NY	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
FLASHING HOSPITAL MED	MEDICAL	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. BISSINGER 853, DON, , MR,		Date of Receipt
Mailing Address 11630 N 83RD AVE		<input type="text" value="12"/> / <input type="text" value="20"/> / <input type="text" value="2017"/>
City	State	Transaction ID : SA11AI.30017
PEORIA	AZ	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text" value="105.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="205.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. BLANKENSHIP 922, CECIL, , MR,		Date of Receipt
Mailing Address 418 S H ST		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2017"/>
City	State	Transaction ID : SA11AI.30071
IMPERIAL	CA	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer (for Individual)	Occupation (for Individual)	<input type="checkbox"/> Memo Item
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="305.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 274
	<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)
TEA PARTY MAJORITY FUND

A. BLAUDOW 320, RICHARD W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18391 AVALON DR

City HILLIARD	State FL	Zip Code 32046
------------------	-------------	-------------------

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

Name of Employer (for Individual) ADVANCED TECHNOLOGY SERVICES	Occupation (for Individual) MANAGER
---	--

Receipt For:
 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		2017

Transaction ID : SA11AI.30079

Amount of Each Receipt this Period
1000.00

Memo Item

B. BLUME 457, KENNETH R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19452 CLIFTON HILL RD

City MACKSBURG	State OH	Zip Code 45746
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2017

Transaction ID : SA11AI.30117

Amount of Each Receipt this Period
205.00

Memo Item

C. BOESE 836, EDMUND, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1643 S LAKE CREST WAY

City EAGLE	State ID	Zip Code 83616
---------------	-------------	-------------------

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

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

Receipt For:
 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
11		06		2017

Transaction ID : SA11AI.30152

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1255.00
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 27 OF 274
	(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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. BOLLAND 980, EUGENE, , MR,

Mailing Address 926 140TH ST SW

City LYNNWOOD	State WA	Zip Code 98087
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		06		2017

Transaction ID : SA11AI.30187

Amount of Each Receipt this Period
200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. BONILLA 674, MARLENE, , MRS,

Mailing Address 145 MILLVIEW RD

City SALINA	State KS	Zip Code 67401
----------------	-------------	-------------------

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

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

Receipt For:
 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		08		2017

Transaction ID : SA11AI.30214

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. BOONE 372, JOHN L, , MR,

Mailing Address 11 BURTON HILLS BLVD APT 253

City NASHVILLE	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2017

Transaction ID : SA11AI.30230

Amount of Each Receipt this Period
110.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BOOZER 367, FRANK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1108 CEDAR CREST DR

City DEMOPOLIS	State AL	Zip Code 36732
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
07		14		2017

Transaction ID : SA11AI.30239

Amount of Each Receipt this Period
105.00

Memo Item

B. BORN 804, VICKIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4071

City GRANBY	State CO	Zip Code 80446
----------------	-------------	-------------------

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

Name of Employer (for Individual) CHANGES THRIFT STORE	Occupation (for Individual) STORE CLERK
---	--

Receipt For:
 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		01		2017

Transaction ID : SA11AI.30261

Amount of Each Receipt this Period
50.00

Memo Item

C. BORN 804, VICKIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 4071

City GRANBY	State CO	Zip Code 80446
----------------	-------------	-------------------

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

Name of Employer (for Individual) CHANGES THRIFT STORE	Occupation (for Individual) STORE CLERK
---	--

Receipt For:
 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
12		01		2017

Transaction ID : SA11AI.30262

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	205.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BOSSE 327, DONALD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 CHEROKEE CIR
 City SANFORD State FL Zip Code 32773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 10 / 2017
Transaction ID : SA11AI.30277
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. BOSSONE 190, KAY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 244 ELLIS RD
 City HAVERTOWN State PA Zip Code 19083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 02 / 2017
Transaction ID : SA11AI.30278
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. BOSWELL 334, JOHN J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3281 MONET DR W
 City PALM BCH GDNS State FL Zip Code 33410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) IND STAVE COMPANY Occupation (for Individual) PRESIDENT
 Receipt For: 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 / 31 / 2017
Transaction ID : SA11AI.30284
 Amount of Each Receipt this Period
 250.00
 Memo Item

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 30 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. BOSWELL 334, JOHN J, , MR,
Mailing Address 3281 MONET DR W

City PALM BCH GDNS	State FL	Zip Code 33410
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) IND STAVE COMPANY	Occupation (for Individual) PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
10 / 09 / 2017
Transaction ID : SA11AI.30285

Amount of Each Receipt this Period
250.00

Memo Item

B. BOWKER 437, LOIS R, , MS,
Mailing Address 528 NORTH ST

City CALDWELL	State OH	Zip Code 43724
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
11 / 01 / 2017
Transaction ID : SA11AI.30318

Amount of Each Receipt this Period
50.00

Memo Item

C. BOWKER 437, LOIS R, , MS,
Mailing Address 528 NORTH ST

City CALDWELL	State OH	Zip Code 43724
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
11 / 06 / 2017
Transaction ID : SA11AI.30319

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BRADLEY 774, SHARON, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3645 HENDERSON RANCH LN
 City BELLVILLE State TX Zip Code 77418
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 17 / 2017
Transaction ID : SA11AI.30369
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BRADSHAW 080, LLOYD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 FORT DONELSON RD
 City PENNSVILLE State NJ Zip Code 08070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 17 / 2017
Transaction ID : SA11AI.30373
 Amount of Each Receipt this Period 205.00
 Memo Item

C. BRANKOVICH 914, MARILYN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4149 HAYVENHURST DR
 City ENCINO State CA Zip Code 91436
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 28 / 2017
Transaction ID : SA11AI.30405
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	505.00
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 32 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. BRAULEY 410, JANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 683 SILVER LEDGE DR

City NEWPORT	State KY	Zip Code 41076
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		07		2017

Transaction ID : SA11AI.30416

Amount of Each Receipt this Period
25.00

Memo Item

B. BRAULEY 410, JANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 683 SILVER LEDGE DR

City NEWPORT	State KY	Zip Code 41076
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
09		08		2017

Transaction ID : SA11AI.30417

Amount of Each Receipt this Period
200.00

Memo Item

C. BRAY 956, SHERYL, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14631 GUADALUPE DR

City RANCHO MURIETA	State CA	Zip Code 95683
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		22		2017

Transaction ID : SA11AI.30428

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	280.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BREWER 735, FRED R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 376

City ELGIN	State OK	Zip Code 73538
---------------	-------------	-------------------

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

Name of Employer (for Individual) BREWER SALES	Occupation (for Individual) PROPRIETOR
---	---

Receipt For:
 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	/	14	/	2017

Transaction ID : SA11AI.30471

Amount of Each Receipt this Period
200.00

Memo Item

B. BREWER 735, FRED R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 376

City ELGIN	State OK	Zip Code 73538
---------------	-------------	-------------------

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

Name of Employer (for Individual) BREWER SALES	Occupation (for Individual) PROPRIETOR
---	---

Receipt For:
 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
12	/	13	/	2017

Transaction ID : SA11AI.30472

Amount of Each Receipt this Period
100.00

Memo Item

C. BROUCEK 481, WILLIAM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18765 GRASS LAKE RD

City MANCHESTER	State MI	Zip Code 48158
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	15	/	2017

Transaction ID : SA11AI.30556

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 34 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BROWER 484, DAVID, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6604 BROOKS RD
 City BROWN CITY State MI Zip Code 48416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BROWER FARM Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 04 / 2017
Transaction ID : SA11AI.30567
 Amount of Each Receipt this Period 250.00
 Memo Item

B. BROWN 087, LES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 411 BAYVIEW AVE
 City BAYVILLE State NJ Zip Code 08721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BERKLEY DESIGN Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 30 / 2017
Transaction ID : SA11AI.30570
 Amount of Each Receipt this Period 50.00
 Memo Item

C. BROWN 740, SHERRIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 881
 City CUSHING State OK Zip Code 74023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 11 / 2017
Transaction ID : SA11AI.30606
 Amount of Each Receipt this Period 100.00
 Memo Item

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: PAGE 35 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. BROWN 740, SHERRIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 881
 City CUSHING State OK Zip Code 74023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 12 / 11 / 2017
Transaction ID : SA11AI.30607
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. BRUECKNER 377, MYNHART, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 W HUNT RD
 City ALCOA State TN Zip Code 37701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 2017
Transaction ID : SA11AI.30636
 Amount of Each Receipt this Period
 75.00
 Memo Item

C. BUCHHOLZ 577, MARY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16249 MDU LOOP
 City BELLE FOURCHE State SD Zip Code 57717
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTR OF THE NATION WOOL INC Occupation (for Individual) DIRECTOR
 Receipt For: 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 / 26 / 2017
Transaction ID : SA11AI.30677
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 425.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BUDGICK 740, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 12705 S 4230 RD

City CHELSEA	State OK	Zip Code 74016
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
08		09		2017

Transaction ID : SA11AI.30695

Amount of Each Receipt this Period
355.00

Memo Item

B. BUECHLE 486, DOROTHY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3493 N TOWER BEACH RD

City PINCONNING	State MI	Zip Code 48650
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

Transaction ID : SA11AI.30700

Amount of Each Receipt this Period
305.00

Memo Item

C. BUENING 624, ALBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 18660 N HIGHWAY 45

City EFFINGHAM	State IL	Zip Code 62401
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) UNEMPLOYED
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : SA11AI.30708

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	715.00
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 274
	<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)
TEA PARTY MAJORITY FUND

A. BULICH 124, MICHAEL T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 64 GREEN POINT RD

City CATSKILL	State NY	Zip Code 12414
------------------	-------------	-------------------

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

Name of Employer (for Individual) BULICH MUSHROOM INC	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 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		2017

Transaction ID : SA11AI.30720

Amount of Each Receipt this Period
250.00

Memo Item

B. BURNS 028, CONRAD R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 867 TIOGUE AVE

City COVENTRY	State RI	Zip Code 02816
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		31		2017

Transaction ID : SA11AI.30772

Amount of Each Receipt this Period
50.00

Memo Item

C. BURTON 559, MARJORIE M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1900 BALLINGTON BLVD NW
APT 427

City ROCHESTER	State MN	Zip Code 55901
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		20		2017

Transaction ID : SA11AI.30803

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 38 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. BURTON 559, MARJORIE M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1900 BALLINGTON BLVD NW
 APT 427
 City ROCHESTER State MN Zip Code 55901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 11 / 07 / 2017
Transaction ID : SA11AI.30804
 Amount of Each Receipt this Period 100.00
 Memo Item

B. BUSADA 210, ELI, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3459 GODSPEED RD
 City DAVIDSONVILLE State MD Zip Code 21035
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 27 / 2017
Transaction ID : SA11AI.30813
 Amount of Each Receipt this Period 100.00
 Memo Item

C. BUSSELL 370, THOMAS R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9238 BRUSHBORO DR
 City BRENTWOOD State TN Zip Code 37027
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ACCOUNTANT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 20 / 2017
Transaction ID : SA11AI.30842
 Amount of Each Receipt this Period 100.00
 Memo Item

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 274
	<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)
TEA PARTY MAJORITY FUND

A. CALLAWAY 945, RICHARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 GREGORY LN

City PLEASANT HILL	State CA	Zip Code 94523
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) MOUNT DIABLO YMCA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 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		2017

Transaction ID : SA11AI.30933

Amount of Each Receipt this Period
100.00

Memo Item

B. CALLAWAY 945, RICHARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 GREGORY LN

City PLEASANT HILL	State CA	Zip Code 94523
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) MOUNT DIABLO YMCA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 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
10		02		2017

Transaction ID : SA11AI.30934

Amount of Each Receipt this Period
100.00

Memo Item

C. CALLAWAY 945, RICHARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 GREGORY LN

City PLEASANT HILL	State CA	Zip Code 94523
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) MOUNT DIABLO YMCA	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 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
11		29		2017

Transaction ID : SA11AI.30935

Amount of Each Receipt this Period
100.00

Memo Item

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 40 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CAMPBELL 191, MARIE M, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2026 E CUMBERLAND ST
 City PHILADELPHIA State PA Zip Code 19125
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 23 / 2017
Transaction ID : SA11AI.30948
 Amount of Each Receipt this Period 50.00
 Memo Item

B. CANNON 802, SUE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6420 W LAKERIDGE RD
 City LAKEWOOD State CO Zip Code 80227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 12 / 2017
Transaction ID : SA11AI.44630
 Amount of Each Receipt this Period 250.00
 Memo Item

C. CARACCI 392, JOYCE P, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5018 RIVERWOOD CIR
 City JACKSON State MS Zip Code 39211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 15 / 2017
Transaction ID : SA11AI.30998
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CARNEY 303, WILLIAM J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 FAIRVIEW RD NE

City ATLANTA	State GA	Zip Code 30306
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
07		14		2017

Transaction ID : SA11AI.31054

Amount of Each Receipt this Period
105.00

Memo Item

B. CARNEY 303, WILLIAM J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 FAIRVIEW RD NE

City ATLANTA	State GA	Zip Code 30306
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Transaction ID : SA11AI.31055

Amount of Each Receipt this Period
105.00

Memo Item

C. CARNEY 303, WILLIAM J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1221 FAIRVIEW RD NE

City ATLANTA	State GA	Zip Code 30306
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
435.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : SA11AI.31056

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	335.00
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 42 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CARROLL 751, MAURICE W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 719 AMHERST DR

City WAXAHACHIE	State TX	Zip Code 75165
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	25	/	2017

Transaction ID : SA11AI.31084

Amount of Each Receipt this Period
100.00

Memo Item

B. CARROLL 751, MAURICE W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 719 AMHERST DR

City WAXAHACHIE	State TX	Zip Code 75165
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10	/	25	/	2017

Transaction ID : SA11AI.31085

Amount of Each Receipt this Period
100.00

Memo Item

C. CASINO 191, MARYANN S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5912 KEYSTONE ST

City PHILADELPHIA	State PA	Zip Code 19135
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEMPLE UNIVERSITY HOSPITAL	Occupation (for Individual) REGISTERED NURSE
---	---

Receipt For:
 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
10	/	30	/	2017

Transaction ID : SA11AI.31118

Amount of Each Receipt this Period
100.00

Memo Item

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 43 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. CASSINGHAM 233, DOROTHY J, , MS,
Mailing Address 1146 WHITBURN TER

City CHESAPEAKE	State VA	Zip Code 23322
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
08 / 22 / 2017
Transaction ID : **SA11AI.31120**

Amount of Each Receipt this Period
200.00

Memo Item

B. CASSINGHAM 233, DOROTHY J, , MS,
Mailing Address 1146 WHITBURN TER

City CHESAPEAKE	State VA	Zip Code 23322
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
11 / 13 / 2017
Transaction ID : **SA11AI.31121**

Amount of Each Receipt this Period
150.00

Memo Item

C. CAST 640, THERESA A, , ,
Mailing Address 503 SOUTHWEST DR

City WARRENSBURG	State MO	Zip Code 64093
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
11 / 07 / 2017
Transaction ID : **SA11AI.31124**

Amount of Each Receipt this Period
200.00

Memo Item

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 44 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CAUTHEN 297, BETTY M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 812

City LANCASTER	State SC	Zip Code 29721
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
08	/	18	/	2017

Transaction ID : SA11AI.31148

Amount of Each Receipt this Period
205.00

Memo Item

B. CEBERT 344, DALE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6885 SE 12TH TER

City OCALA	State FL	Zip Code 34480
---------------	-------------	-------------------

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

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

Receipt For:
 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	/	13	/	2017

Transaction ID : SA11AI.31169

Amount of Each Receipt this Period
100.00

Memo Item

C. CEBERT 344, DALE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6885 SE 12TH TER

City OCALA	State FL	Zip Code 34480
---------------	-------------	-------------------

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

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

Receipt For:
 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
10	/	13	/	2017

Transaction ID : SA11AI.31170

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	405.00
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 45 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. CHANDLER 763, DELIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4505 BARBADOS

City WICHITA FALLS	State TX	Zip Code 76308
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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		14		2017

Transaction ID : SA11AI.31197

Amount of Each Receipt this Period
100.00

Memo Item

B. CHANDLER 763, DELIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4505 BARBADOS

City WICHITA FALLS	State TX	Zip Code 76308
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
10		16		2017

Transaction ID : SA11AI.31198

Amount of Each Receipt this Period
100.00

Memo Item

C. CHANDLER 763, DELIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4505 BARBADOS

City WICHITA FALLS	State TX	Zip Code 76308
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
11		01		2017

Transaction ID : SA11AI.31199

Amount of Each Receipt this Period
- 100.00

Memo Item

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 46 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CHASSE 432, JEANINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 E ROYAL FOREST BLVD

City COLUMBUS	State OH	Zip Code 43214
------------------	-------------	-------------------

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

Name of Employer (for Individual) OHIO HEALTH	Occupation (for Individual) HOSPICE NURSE
--	--

Receipt For:
 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
07		26		2017

Transaction ID : SA11AI.31236

Amount of Each Receipt this Period
50.00

Memo Item

B. CHASSE 432, JEANINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 E ROYAL FOREST BLVD

City COLUMBUS	State OH	Zip Code 43214
------------------	-------------	-------------------

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

Name of Employer (for Individual) OHIO HEALTH	Occupation (for Individual) HOSPICE NURSE
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2017

Transaction ID : SA11AI.31237

Amount of Each Receipt this Period
10.00

Memo Item

C. CHASSE 432, JEANINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 E ROYAL FOREST BLVD

City COLUMBUS	State OH	Zip Code 43214
------------------	-------------	-------------------

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

Name of Employer (for Individual) OHIO HEALTH	Occupation (for Individual) HOSPICE NURSE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		27		2017

Transaction ID : SA11AI.31238

Amount of Each Receipt this Period
10.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
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 47 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CHAUSSEE 980, CAROL, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7524 118TH AVE NE

City KIRKLAND	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		14		2017

Transaction ID : SA11AI.31241

Amount of Each Receipt this Period
100.00

Memo Item

B. CHAUSSEE 980, CAROL, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7524 118TH AVE NE

City KIRKLAND	State WA	Zip Code 98033
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		14		2017

Transaction ID : SA11AI.31242

Amount of Each Receipt this Period
100.00

Memo Item

C. CHEVALIER 281, MAURICE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7904 AGAPE LN

City WAXHAW	State NC	Zip Code 28173
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		25		2017

Transaction ID : SA11AI.31264

Amount of Each Receipt this Period
100.00

Memo Item

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 48 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. CHEVALIER 281, MAURICE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7904 AGAPE LN

City WAXHAW	State NC	Zip Code 28173
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
12 / 12 / 2017
Transaction ID : **SA11AI.31265**

Amount of Each Receipt this Period
100.00

Memo Item

B. CHRISTIAN 793, LILLIE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 899 FM 1731

City FARWELL	State TX	Zip Code 79325
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 18 / 2017
Transaction ID : **SA11AI.31304**

Amount of Each Receipt this Period
105.00

Memo Item

C. CHRISTNER 726, DANIEL L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 7094 BLEVINS RD

City HARRISON	State AR	Zip Code 72601
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 330.00

Date of Receipt
09 / 12 / 2017
Transaction ID : **SA11AI.31316**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 49 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CHRISTNER 726, DANIEL L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7094 BLEVINS RD

City HARRISON	State AR	Zip Code 72601
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2017

Transaction ID : SA11AI.31317

Amount of Each Receipt this Period
100.00

Memo Item

B. CHRISTNER 726, DANIEL L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7094 BLEVINS RD

City HARRISON	State AR	Zip Code 72601
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		12		2017

Transaction ID : SA11AI.31318

Amount of Each Receipt this Period
100.00

Memo Item

C. CLARK 085, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 TURNBRIDGE CT

City JACKSON	State NJ	Zip Code 08527
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		12		2017

Transaction ID : SA11AI.31365

Amount of Each Receipt this Period
50.00

Memo Item

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 50 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CLARK 085, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16 TURNBRIDGE CT

City JACKSON	State NJ	Zip Code 08527
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12	/	12	/	2017

Transaction ID : SA11AI.31366

Amount of Each Receipt this Period
50.00

Memo Item

B. CLOETINGH 194, THOMAS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2084 PICKERING RD

City PHOENIXVILLE	State PA	Zip Code 19460
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	15	/	2017

Transaction ID : SA11AI.31593

Amount of Each Receipt this Period
250.00

Memo Item

C. CLOWE 431, ROBERT W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1310 LYNN DR

City LANCASTER	State OH	Zip Code 43130
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	01	/	2017

Transaction ID : SA11AI.31602

Amount of Each Receipt this Period
255.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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 51 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COCKLE 981, MICHAEL J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2452 MONTAVISTA PL W

City SEATTLE	State WA	Zip Code 98199
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) Retired
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
345.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2017

Transaction ID : SA11AI.31628

Amount of Each Receipt this Period
100.00

Memo Item

B. COCKLE 981, MICHAEL J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2452 MONTAVISTA PL W

City SEATTLE	State WA	Zip Code 98199
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
445.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2017

Transaction ID : SA11AI.31629

Amount of Each Receipt this Period
100.00

Memo Item

C. COLL 786, MARYELLEN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2601 GLENWOOD TRL

City CEDAR PARK	State TX	Zip Code 78613
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		09		2017

Transaction ID : SA11AI.31671

Amount of Each Receipt this Period
100.00

Memo Item

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 52 OF 274
	(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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. COLL 786, MARYELLEN, , MS,			Date of Receipt												
Mailing Address 2601 GLENWOOD TRL			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>09</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		09		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
11		09		2017											
City CEDAR PARK State TX Zip Code 78613			Transaction ID : SA11AI.31672												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td>100.00</td> </tr> </table>			100.00									
100.00															
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED			<input type="checkbox"/> Memo Item												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td>400.00</td> </tr> </table>				400.00									
400.00															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. COLLERY 357, BARBARA G, , MS,			Date of Receipt												
Mailing Address 396 JAMES RD SE			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>13</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	11		13		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
11		13		2017											
City OWENS CROSS ROADS State AL Zip Code 35763			Transaction ID : SA11AI.31674												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td>50.00</td> </tr> </table>			50.00									
50.00															
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED			<input type="checkbox"/> Memo Item												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td>250.00</td> </tr> </table>				250.00									
250.00															

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. COLLINS 975, Z I, , ,			Date of Receipt												
Mailing Address PO BOX 849			<table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2017</td> </tr> </table>			M M M	/	D D D	/	Y Y Y Y Y Y	10		30		2017
M M M	/	D D D	/	Y Y Y Y Y Y											
10		30		2017											
City SHADY COVE State OR Zip Code 97539			Transaction ID : SA11AI.31690												
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period												
			<table border="1"> <tr> <td>500.00</td> </tr> </table>			500.00									
500.00															
Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER			<input type="checkbox"/> Memo Item												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼													
		<table border="1"> <tr> <td>500.00</td> </tr> </table>				500.00									
500.00															

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1"> <tr> <td>650.00</td> </tr> </table>	650.00
650.00		
TOTAL This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	

**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 53 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COLSON 549, NORMAN L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 W PERSHING ST

City APPLETON	State WI	Zip Code 54914
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		12		2017

Transaction ID : SA11AI.31699

Amount of Each Receipt this Period
25.00

Memo Item

B. COLSON 549, NORMAN L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1332 W PERSHING ST

City APPLETON	State WI	Zip Code 54914
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		12		2017

Transaction ID : SA11AI.31700

Amount of Each Receipt this Period
25.00

Memo Item

C. COLTRANE 177, LORETTA E, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		27		2017

Transaction ID : SA11AI.31705

Amount of Each Receipt this Period
100.00

Memo Item

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 54 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COLTRANE 177, LORETTA E, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2017

Transaction ID : SA11AI.31706

Amount of Each Receipt this Period
105.00

Memo Item

B. COLTRANE 177, LORETTA E, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 205

City WOOLRICH	State PA	Zip Code 17779
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
415.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2017

Transaction ID : SA11AI.31707

Amount of Each Receipt this Period
105.00

Memo Item

C. CONNOR 024, MARIA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 36 ALLERTON ST

City BROOKLINE	State MA	Zip Code 02445
-------------------	-------------	-------------------

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

Name of Employer (for Individual) POLYVINYL FILMS	Occupation (for Individual) VICE PRESIDENT
--	---

Receipt For:
 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
10	/	12	/	2017

Transaction ID : SA11AI.44275

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	460.00
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 55 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. CONNOR 024, MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 36 ALLERTON ST
 City BROOKLINE State MA Zip Code 02445
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POLYVINYL FILMS Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **10 / 16 / 2017**
Transaction ID : SA11AI.44276
 Amount of Each Receipt this Period 100.00
 Memo Item

B. CONTI 809, JESSE D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2301
 City COLORADO SPGS State CO Zip Code 80901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt **08 / 09 / 2017**
Transaction ID : SA11AI.31763
 Amount of Each Receipt this Period 200.00
 Memo Item

C. CONTI 809, JESSE D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2301
 City COLORADO SPGS State CO Zip Code 80901
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **11 / 06 / 2017**
Transaction ID : SA11AI.31764
 Amount of Each Receipt this Period 205.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	505.00
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 56 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COONLY 787, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 W 3RD ST
APT 3336

City AUSTIN State TX Zip Code 78701

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

Name of Employer (for Individual) COONLY LAW FIRM Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1600.00

Date of Receipt
08 / 14 / 2017
Transaction ID : SA11Al.31806

Amount of Each Receipt this Period
100.00

Memo Item

B. COONLY 787, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 W 3RD ST
APT 3336

City AUSTIN State TX Zip Code 78701

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

Name of Employer (for Individual) COONLY LAW FIRM Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt
09 / 25 / 2017
Transaction ID : SA11Al.31807

Amount of Each Receipt this Period
100.00

Memo Item

C. COONLY 787, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 800 W 3RD ST
APT 3336

City AUSTIN State TX Zip Code 78701

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

Name of Employer (for Individual) COONLY LAW FIRM Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
11 / 13 / 2017
Transaction ID : SA11Al.31808

Amount of Each Receipt this Period
100.00

Memo Item

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 57 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COOPER 279, PATRICIA S, , MS,
Mailing Address 951 HALLS CREEK RD

City ELIZABETH CITY	State NC	Zip Code 27909
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2017

Transaction ID : SA11AI.31817

Amount of Each Receipt this Period
105.00

Memo Item

B. CORSON 847, LOIS, , MS,
Mailing Address PO BOX 121

City GLENDALE	State UT	Zip Code 84729
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2017

Transaction ID : SA11AI.31859

Amount of Each Receipt this Period
200.00

Memo Item

C. CORSON 847, LOIS, , MS,
Mailing Address PO BOX 121

City GLENDALE	State UT	Zip Code 84729
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2017

Transaction ID : SA11AI.31860

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	405.00
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 58 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. COUCH 244, RICHARD E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13803 BIRDAVEN LN

City GROTTOES	State VA	Zip Code 24441
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MACHINE OPERATOR
--	---

Receipt For:
 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	/	11	/	2017

Transaction ID : SA11AI.31881

Amount of Each Receipt this Period
100.00

Memo Item

B. COUCH 244, RICHARD E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13803 BIRDAVEN LN

City GROTTOES	State VA	Zip Code 24441
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) MACHINE OPERATOR
--	---

Receipt For:
 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
11	/	20	/	2017

Transaction ID : SA11AI.31882

Amount of Each Receipt this Period
100.00

Memo Item

C. COX 290, MAX, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 S CANTERBURY CT

City BLYTHEWOOD	State SC	Zip Code 29016
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	07	/	2017

Transaction ID : SA11AI.31913

Amount of Each Receipt this Period
100.00

Memo Item

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 59 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. COX 412, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 436 MAIN ST
 City PAINTSVILLE State KY Zip Code 41240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 10 / 04 / 2017
Transaction ID : SA11AI.31920
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. COX 797, JERRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 95
 City LENORAH State TX Zip Code 79749
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) PLUMBER
 Receipt For: 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 / 19 / 2017
Transaction ID : SA11AI.31928
 Amount of Each Receipt this Period
 350.00
 Memo Item

C. CRABTREE 452, HAROLD G, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5159 SIDNEY RD
 City CINCINNATI State OH Zip Code 45238
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 11 / 01 / 2017
Transaction ID : SA11AI.31929
 Amount of Each Receipt this Period
 200.00
 Memo Item

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 60 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CRABTREE 452, HAROLD G, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5159 SIDNEY RD

City CINCINNATI	State OH	Zip Code 45238
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

Transaction ID : SA11AI.31930

Amount of Each Receipt this Period
100.00

Memo Item

B. CRIFASI 708, SAMUEL J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15862 FOXWOOD AVE

City BATON ROUGE	State LA	Zip Code 70816
---------------------	-------------	-------------------

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

Name of Employer (for Individual) HI-NABOR GROCERY	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2017

Transaction ID : SA11AI.31969

Amount of Each Receipt this Period
50.00

Memo Item

C. CRITSER 604, JERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16249 LAKEWOOD PATH

City HOMER GLEN	State IL	Zip Code 60491
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	18	/	2017

Transaction ID : SA11AI.31981

Amount of Each Receipt this Period
250.00

Memo Item

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 61 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CRITSER 604, JERRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16249 LAKEWOOD PATH

City HOMER GLEN	State IL	Zip Code 60491
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10	/	17	/	2017

Transaction ID : SA11AI.31982

Amount of Each Receipt this Period
250.00

Memo Item

B. CRITTENDEN 365, DALE A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 517

City FAIRHOPE	State AL	Zip Code 36533
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2017

Transaction ID : SA11AI.31983

Amount of Each Receipt this Period
105.00

Memo Item

C. CROSS 276, FRANK T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 ADAMS ST

City RALEIGH	State NC	Zip Code 27605
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	19	/	2017

Transaction ID : SA11AI.31997

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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 62 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. CROUCH 624, JUDITH A, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6812 N 300TH ST
 City CASEY State IL Zip Code 62420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 23 / 2017
Transaction ID : SA11AI.32013
 Amount of Each Receipt this Period 200.00
 Memo Item

B. CRUCE 283, BARBARA J, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 N ROBERTS AVE APT 2A
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 07 / 2017
Transaction ID : SA11AI.32030
 Amount of Each Receipt this Period 100.00
 Memo Item

C. CRUCE 283, BARBARA J, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2601 N ROBERTS AVE APT 2A
 City LUMBERTON State NC Zip Code 28358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 06 / 2017
Transaction ID : SA11AI.32031
 Amount of Each Receipt this Period 100.00
 Memo Item

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:	PAGE 63 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. CRUMB 770, CHARLES, , DR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1644 CASTLE CT

City HOUSTON	State TX	Zip Code 77006
-----------------	-------------	-------------------

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

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

Receipt For:
 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		18		2017

Transaction ID : SA11AI.32035

Amount of Each Receipt this Period
100.00

Memo Item

B. CUMMINGS 606, MARK F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6123 N FRANCISCO AVE

City CHICAGO	State IL	Zip Code 60659
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		17		2017

Transaction ID : SA11AI.32059

Amount of Each Receipt this Period
45.00

Memo Item

C. DANKOWSKI 346, JAMES J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14240 CASCORA CT

City SPRING HILL	State FL	Zip Code 34609
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		14		2017

Transaction ID : SA11AI.32145

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	195.00
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 64 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. DANKOWSKI 346, JAMES J, , MR,
Mailing Address 14240 CASCORA CT

City SPRING HILL	State FL	Zip Code 34609
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
12 / 06 / 2017
Transaction ID : SA11AI.32146

Amount of Each Receipt this Period
50.00

Memo Item

B. DANZE 787, LEO, , MR,
Mailing Address 4722 TWIN VALLEY DR

City AUSTIN	State TX	Zip Code 78731
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
08 / 23 / 2017
Transaction ID : SA11AI.32147

Amount of Each Receipt this Period
100.00

Memo Item

C. DANZE 787, LEO, , MR,
Mailing Address 4722 TWIN VALLEY DR

City AUSTIN	State TX	Zip Code 78731
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
11 / 23 / 2017
Transaction ID : SA11AI.32148

Amount of Each Receipt this Period
100.00

Memo Item

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:	PAGE 65 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. DAVENPORT 402, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2035 BRUCE AVE
 City LOUISVILLE State KY Zip Code 40218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2017
Transaction ID : SA11AI.32176
 Amount of Each Receipt this Period 50.00
 Memo Item

B. DAVIDE 331, ANA MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 COUNTRY CLUB PRADO
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 09 / 29 / 2017
Transaction ID : SA11AI.32184
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DAVIDE 331, ANA MARIA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2015 COUNTRY CLUB PRADO
 City CORAL GABLES State FL Zip Code 33134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.32185
 Amount of Each Receipt this Period 100.00
 Memo Item

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:	PAGE 66 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. DAVIES 208, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10109 SORREL AVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 08 / 2017**
Transaction ID : SA11AI.32194
 Amount of Each Receipt this Period 100.00
 Memo Item

B. DAVIES 208, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10109 SORREL AVE
 City POTOMAC State MD Zip Code 20854
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 08 / 2017**
Transaction ID : SA11AI.32195
 Amount of Each Receipt this Period 100.00
 Memo Item

C. DECENZO 430, JUDITH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5180 WARNER RD
 City WESTERVILLE State OH Zip Code 43081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt **11 / 15 / 2017**
Transaction ID : SA11AI.32283
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 67 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. DEGROOT 601, PAUL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1S500 FAIRVIEW AVE

City LOMBARD	State IL	Zip Code 60148
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	03	/	2017

Transaction ID : SA11AI.32308

Amount of Each Receipt this Period
250.00

Memo Item

B. DELANEY 198, PATRICIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 509 TYRONE AVE

City WILMINGTON	State DE	Zip Code 19804
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	11	/	2017

Transaction ID : SA11AI.32329

Amount of Each Receipt this Period
100.00

Memo Item

C. DENTINGER 680, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1012 E CARY ST

City PAPILLION	State NE	Zip Code 68046
-------------------	-------------	-------------------

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

Name of Employer (for Individual) FIRST COMMAND FINANCIAL	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	12	/	2017

Transaction ID : SA11AI.32366

Amount of Each Receipt this Period
200.00

Memo Item

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:	PAGE 68 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. DICKSON 809, N STUART, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 OSAGE WAY

City COLORADO SPRINGS	State CO	Zip Code 80915
--------------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2017

Transaction ID : SA11AI.32430

Amount of Each Receipt this Period
40.00

Memo Item

B. DICKSON 809, N STUART, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1735 OSAGE WAY

City COLORADO SPRINGS	State CO	Zip Code 80915
--------------------------	-------------	-------------------

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

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

Receipt For:
 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
11		13		2017

Transaction ID : SA11AI.32431

Amount of Each Receipt this Period
35.00

Memo Item

C. DIXON 581, JIM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10307

City FARGO	State ND	Zip Code 58106
---------------	-------------	-------------------

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

Name of Employer (for Individual) DIXON INSURANCE CO	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:
 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		03		2017

Transaction ID : SA11AI.32480

Amount of Each Receipt this Period
50.00

Memo Item

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 69 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. DIXON 581, JIM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 10307

City FARGO State ND Zip Code 58106

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

Name of Employer (for Individual) DIXON INSURANCE CO Occupation (for Individual) CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 02 / 2017
Transaction ID : SA11AI.32481

Amount of Each Receipt this Period 50.00

Memo Item

B. DONOVAN 852, JOHN F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7508 E MINNEZONA AVE

City SCOTTSDALE State AZ Zip Code 85251

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 28 / 2017
Transaction ID : SA11AI.32552

Amount of Each Receipt this Period 100.00

Memo Item

C. DONOVAN 852, JOHN F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7508 E MINNEZONA AVE

City SCOTTSDALE State AZ Zip Code 85251

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 28 / 2017
Transaction ID : SA11AI.32553

Amount of Each Receipt this Period 100.00

Memo Item

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 70 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. DRAKE 305, GAIL S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2638 WATERS EDGE DR

City GAINESVILLE	State GA	Zip Code 30504
---------------------	-------------	-------------------

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

Name of Employer (for Individual) FIRST CHOICE TITLE	Occupation (for Individual) SELF EMPLOYED
---	--

Receipt For:
 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		18		2017

Transaction ID : SA11AI.32613

Amount of Each Receipt this Period
250.00

Memo Item

B. DRUEKE 370, CLAUDINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8239 HAWKINS RD

City COLLEGE GROVE	State TN	Zip Code 37046
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : SA11AI.32631

Amount of Each Receipt this Period
40.00

Memo Item

C. DRUEKE 370, CLAUDINE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8239 HAWKINS RD

City COLLEGE GROVE	State TN	Zip Code 37046
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2017

Transaction ID : SA11AI.32632

Amount of Each Receipt this Period
30.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	320.00
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 71 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. DUNCANSON 853, DWIGHT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15613 N 56TH DR

City GLENDALE	State AZ	Zip Code 85306
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
08		02		2017

Transaction ID : SA11AI.32686

Amount of Each Receipt this Period

105.00

 Memo Item

B. DUNHAM 815, GEORGE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 26 1/2 RD

City GRAND JCT	State CO	Zip Code 81506
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2017

Transaction ID : SA11AI.32690

Amount of Each Receipt this Period

255.00

 Memo Item

C. DUNHAM 815, GEORGE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 608 26 1/2 RD

City GRAND JCT	State CO	Zip Code 81506
-------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
610.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

Transaction ID : SA11AI.32691

Amount of Each Receipt this Period

255.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	615.00
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 72 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. DURRETT 757, JACKIE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2617 OKEEFE RD
 City JACKSONVILLE State TX Zip Code 75766
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEDNESDAY STUDY CLUB Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 15 / 2017
Transaction ID : SA11AI.32725
 Amount of Each Receipt this Period 80.00
 Memo Item

B. EAKES 275, NADINE G, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KILLDEER DR
 City LOUISBURG State NC Zip Code 27549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 15 / 2017
Transaction ID : SA11AI.32765
 Amount of Each Receipt this Period 65.00
 Memo Item

C. EAKES 275, NADINE G, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 KILLDEER DR
 City LOUISBURG State NC Zip Code 27549
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 29 / 2017
Transaction ID : SA11AI.32766
 Amount of Each Receipt this Period 65.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 210.00
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 73 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. EDGERLY 021, LOIS S, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32 HIGHLAND ST

City CAMBRIDGE	State MA	Zip Code 02138
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	28	/	2017

Transaction ID : SA11AI.32814

Amount of Each Receipt this Period
150.00

Memo Item

B. EDWARDS 883, JON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 782

City HIGH ROLLS	State NM	Zip Code 88325
--------------------	-------------	-------------------

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

Name of Employer (for Individual) US ARMY	Occupation (for Individual) PILOT
--	--------------------------------------

Receipt For:
 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
11	/	06	/	2017

Transaction ID : SA11AI.32855

Amount of Each Receipt this Period
250.00

Memo Item

C. EGAN 956, DAVID H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2523 MCGREGOR DR

City RANCHO CORDOVA	State CA	Zip Code 95670
------------------------	-------------	-------------------

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

Name of Employer (for Individual) US POSTAL SERVICE	Occupation (for Individual) POSTAL CLERK
--	---

Receipt For:
 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
10	/	04	/	2017

Transaction ID : SA11AI.32858

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	800.00
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 74 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. EICHEL 891, WILLIS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2868 VISTA DEL SOL AVE

City LAS VEGAS	State NV	Zip Code 89120
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 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		18		2017

Transaction ID : SA11AI.32877

Amount of Each Receipt this Period
250.00

Memo Item

B. ENGGREN 087, JOHN W, , MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15 LAWRENCE AVE

City BAYVILLE	State NJ	Zip Code 08721
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		10		2017

Transaction ID : SA11AI.32967

Amount of Each Receipt this Period
30.00

Memo Item

C. ENGLISH 285, HELEN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 226 SANDRIDGE RD

City HUBERT	State NC	Zip Code 28539
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		12		2017

Transaction ID : SA11AI.32971

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 75 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. EPP 231, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9403 MARIE RD

City NEW KENT	State VA	Zip Code 23124
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12	/	29	/	2017

Transaction ID : SA11AI.32990

Amount of Each Receipt this Period
50.00

Memo Item

B. ESBENHASDE 747, JIM R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2174 HENDRIX RD

City COLBERT	State OK	Zip Code 74733
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ESBENSHADE FARMS	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 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
11	/	22	/	2017

Transaction ID : SA11AI.33024

Amount of Each Receipt this Period
200.00

Memo Item

C. ESBENHASDE 747, JIM R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2174 HENDRIX RD

City COLBERT	State OK	Zip Code 74733
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ESBENSHADE FARMS	Occupation (for Individual) FARMER
---	---------------------------------------

Receipt For:
 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
11	/	27	/	2017

Transaction ID : SA11AI.33025

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 76 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. EVANS 660, JAMES PRESTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 CLINTON PKWY

City LAWRENCE	State KS	Zip Code 66047
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		18		2017

Transaction ID : SA11AI.33066

Amount of Each Receipt this Period
100.00

Memo Item

B. EVANS 660, JAMES PRESTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 CLINTON PKWY

City LAWRENCE	State KS	Zip Code 66047
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		09		2017

Transaction ID : SA11AI.33067

Amount of Each Receipt this Period
100.00

Memo Item

C. EVANS 660, JAMES PRESTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5000 CLINTON PKWY

City LAWRENCE	State KS	Zip Code 66047
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		11		2017

Transaction ID : SA11AI.33068

Amount of Each Receipt this Period
100.00

Memo Item

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 77 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. FAAS 522, STEVEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 347 TONGA DR
 City HIAWATHA State IA Zip Code 52233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 07 / 17 / 2017
Transaction ID : SA11AI.33094
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. FAAS 522, STEVEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 347 TONGA DR
 City HIAWATHA State IA Zip Code 52233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 09 / 15 / 2017
Transaction ID : SA11AI.33095
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. FARQUHAR 349, JERRY L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 32801 US HIGHWAY 441 N
 LOT 118
 City OKEECHOBEE State FL Zip Code 34972
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 02 / 2017
Transaction ID : SA11AI.33141
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. FARQUHAR 349, JERRY L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32801 US HIGHWAY 441 N
LOT 118

City OKEECHOBEE	State FL	Zip Code 34972
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	01	/	2017

Transaction ID : SA11AI.33142

Amount of Each Receipt this Period
100.00

Memo Item

B. FARQUHAR 349, JERRY L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 32801 US HIGHWAY 441 N
LOT 118

City OKEECHOBEE	State FL	Zip Code 34972
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	23	/	2017

Transaction ID : SA11AI.33143

Amount of Each Receipt this Period
100.00

Memo Item

C. FAUSTI 341, ROBERT D, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3969 RECREATION LN

City NAPLES	State FL	Zip Code 34116
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
07	/	19	/	2017

Transaction ID : SA11AI.33163

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 79 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. FAUSTI 341, ROBERT D, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3969 RECREATION LN

City NAPLES	State FL	Zip Code 34116
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2017

Transaction ID : SA11AI.33164

Amount of Each Receipt this Period
100.00

Memo Item

B. FEE 100, BERNADETTE T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 653 E 14TH ST APT 11E

City NEW YORK	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 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
07		12		2017

Transaction ID : SA11AI.33173

Amount of Each Receipt this Period
200.00

Memo Item

C. FEE 100, BERNADETTE T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 653 E 14TH ST APT 11E

City NEW YORK	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2017

Transaction ID : SA11AI.33174

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. FEE 100, BERNADETTE T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 653 E 14TH ST APT 11E

City NEW YORK	State NY	Zip Code 10009
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
925.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2017

Transaction ID : SA11AI.33175

Amount of Each Receipt this Period
250.00

Memo Item

B. FENNEL 615, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 W BRISTOL HOLLOW RD

City DUNLAP	State IL	Zip Code 61525
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	25	/	2017

Transaction ID : SA11AI.33209

Amount of Each Receipt this Period
100.00

Memo Item

C. FERRELL 840, JAY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2353 W FAWN HOLLOW CT

City BLUFFDALE	State UT	Zip Code 84065
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10	/	04	/	2017

Transaction ID : SA11AI.33240

Amount of Each Receipt this Period
250.00

Memo Item

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 81 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. FIELDMAN 115, JOEL, , DR,
Mailing Address 40 TURF LN

City ROSLYN HEIGHTS	State NY	Zip Code 11577
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) DOCTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 510.00

Date of Receipt
09 / 11 / 2017
Transaction ID : SA11AI.33253

Amount of Each Receipt this Period
110.00

Memo Item

B. FLOECK 782, DANIEL D, , MR,
Mailing Address 25914 PEREGRINE RDG

City SAN ANTONIO	State TX	Zip Code 78260
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
10 / 23 / 2017
Transaction ID : SA11AI.33344

Amount of Each Receipt this Period
1000.00

Memo Item

C. FONTANA 117, MARIE, , MS,
Mailing Address 3794 OATTY CT

City BETHPAGE	State NY	Zip Code 11714
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
11 / 09 / 2017
Transaction ID : SA11AI.33375

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1160.00
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 82 OF 274 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. FORBES 337, DAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 83RD AVE N
APT 321

City ST PETERSBURG	State FL	Zip Code 33702
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 03 / 2017

Transaction ID : SA11AI.33380

Amount of Each Receipt this Period
100.00

Memo Item

B. FORBES 337, DAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 83RD AVE N
APT 321

City ST PETERSBURG	State FL	Zip Code 33702
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 10 / 03 / 2017

Transaction ID : SA11AI.33381

Amount of Each Receipt this Period
100.00

Memo Item

C. FOREMAN 760, DAVID, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1106 MALLARD CT

City GRANBURY	State TX	Zip Code 76048
------------------	-------------	-------------------

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

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

Receipt For:
 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 / 20 / 2017

Transaction ID : SA11AI.33393

Amount of Each Receipt this Period
100.00

Memo Item

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 83 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. FORRESTAL 532, KATHLEEN D, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2505 E BRADFORD AVE APT 3304

City MILWAUKEE	State WI	Zip Code 53211
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 11 / 08 / 2017

Transaction ID : SA11AI.33401

Amount of Each Receipt this Period
300.00

Memo Item

B. FOSTER 838, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1208

City PINEHURST	State ID	Zip Code 83850
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 12 / 11 / 2017

Transaction ID : SA11AI.33432

Amount of Each Receipt this Period
100.00

Memo Item

C. FRAHM 321, DONALD R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7 AVENUE DE LA MER APT 1006

City PALM COAST	State FL	Zip Code 32137
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 09 / 2017

Transaction ID : SA11AI.33451

Amount of Each Receipt this Period
200.00

Memo Item

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:	PAGE 84 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. FRAZIER 933, BERNICE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13500 SMOKE CREEK AVE

City BAKERSFIELD	State CA	Zip Code 93314
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	20	/	2017

Transaction ID : SA11AI.33490

Amount of Each Receipt this Period
50.00

Memo Item

B. FRAZIER 933, BERNICE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13500 SMOKE CREEK AVE

City BAKERSFIELD	State CA	Zip Code 93314
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	27	/	2017

Transaction ID : SA11AI.33491

Amount of Each Receipt this Period
50.00

Memo Item

C. GAFFORD 365, SARAH, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13481 COUNTY ROAD 54

City LOXLEY	State AL	Zip Code 36551
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GAFFORD ROOFING	Occupation (for Individual) PRINCIPAL
--	--

Receipt For:
 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
11	/	15	/	2017

Transaction ID : SA11AI.33587

Amount of Each Receipt this Period
75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 85 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. GERSTENFELD 200, ROGER, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4900 QUEBEC ST NW

City WASHINGTON	State DC	Zip Code 20016
--------------------	-------------	-------------------

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

Name of Employer (for Individual) OMNIA PROPERTIES	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 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
10		11		2017

Transaction ID : SA11AI.33803

Amount of Each Receipt this Period
50.00

Memo Item

B. GIBSON 891, FRED, , MR, JR
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3204 PLAZA DE RAFAEL

City LAS VEGAS	State NV	Zip Code 89102
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
07		14		2017

Transaction ID : SA11AI.33837

Amount of Each Receipt this Period
205.00

Memo Item

C. GIVENS 781, W, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 22133 OLD NACOGDOCHES RD

City NEW BRAUNFELS	State TX	Zip Code 78132
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) RH & DG GIVENS INC	Occupation (for Individual) VICE PRESIDENT
---	---

Receipt For:
 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
10		02		2017

Transaction ID : SA11AI.33891

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	355.00
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 86 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. GLAZER 752, MAURICE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13747 MONTFORT 350
 City DALLAS State TX Zip Code 75240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GLAZER FINANCIAL NETWORK Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 12 / 2017**
Transaction ID : SA11AI.44314
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GLIELMI 109, RICHARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2108 FRED ILL JR CT
 City PEARL RIVER State NY Zip Code 10965
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 24 / 2017**
Transaction ID : SA11AI.33922
 Amount of Each Receipt this Period 100.00
 Memo Item

C. GODWIN 750, MARVIN D, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 N MIRICK AVE
 City DENISON State TX Zip Code 75020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **09 / 20 / 2017**
Transaction ID : SA11AI.33953
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	455.00
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 87 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. GOMEZ 337, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 45TH ST N
 City SAINT PETERSBURG State FL Zip Code 33713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTRICAL ENGINEER Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 29 / 2017
Transaction ID : SA11Al.33976
 Amount of Each Receipt this Period 250.00
 Memo Item

B. GOMEZ 337, AL, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2050 45TH ST N
 City SAINT PETERSBURG State FL Zip Code 33713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELECTRICAL ENGINEER Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 11 / 2017
Transaction ID : SA11Al.33977
 Amount of Each Receipt this Period 50.00
 Memo Item

C. GOOCH 641, GARY L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 NW CROOKED RD
 City KANSAS CITY State MO Zip Code 64152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 310.00

Date of Receipt 08 / 18 / 2017
Transaction ID : SA11Al.33992
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	405.00
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 88 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. GOOCH 641, GARY L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11015 NW CROOKED RD
 City KANSAS CITY State MO Zip Code 64152
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 415.00

Date of Receipt **12 / 07 / 2017**
Transaction ID : SA11AI.33993
 Amount of Each Receipt this Period 105.00
 Memo Item

B. GOSDIN 750, GARY R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1605 CROCKETT CIR
 City IRVING State TX Zip Code 75038
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **07 / 19 / 2017**
Transaction ID : SA11AI.34038
 Amount of Each Receipt this Period 105.00
 Memo Item

C. GOULD 922, CHARLENE M, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 78770 SUNRISE MOUNTAIN VW
 City PALM DESERT State CA Zip Code 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **09 / 05 / 2017**
Transaction ID : SA11AI.34049
 Amount of Each Receipt this Period 205.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	415.00
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 89 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. GRANT 088, PAUL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 217 MORGAN AVE

City SOUTH AMBOY	State NJ	Zip Code 08879
---------------------	-------------	-------------------

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

Name of Employer (for Individual) MIDDLE SECTS COUNTY COLLEGE	Occupation (for Individual) TEACHER
--	--

Receipt For:
 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
12	/	06	/	2017

Transaction ID : SA11AI.34084

Amount of Each Receipt this Period
50.00

Memo Item

B. GRAVES 432, ARON R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1336 SOUTHFIELD DR S

City COLUMBUS	State OH	Zip Code 43207
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 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	/	04	/	2017

Transaction ID : SA11AI.34111

Amount of Each Receipt this Period
100.00

Memo Item

C. GRAVES 432, ARON R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1336 SOUTHFIELD DR S

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10	/	11	/	2017

Transaction ID : SA11AI.34112

Amount of Each Receipt this Period
250.00

Memo Item

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: PAGE 90 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. GRAVES 432, ARON R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1336 SOUTHFIELD DR S
 City COLUMBUS State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt 12 / 04 / 2017
Transaction ID : SA11AI.34113
 Amount of Each Receipt this Period 100.00
 Memo Item

B. GRAVES 432, ARON R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1336 SOUTHFIELD DR S
 City COLUMBUS State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 950.00

Date of Receipt 12 / 14 / 2017
Transaction ID : SA11AI.34114
 Amount of Each Receipt this Period 300.00
 Memo Item

C. GREGORY 293, MARIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2125 HIGHWAY 14 E
 City LANDRUM State SC Zip Code 29356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SOUTH CAROLINA Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 27 / 2017
Transaction ID : SA11AI.34189
 Amount of Each Receipt this Period 200.00
 Memo Item

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 91 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. GROSSO 088, NANCY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 LONG HILL RD
 City HILLSBOROUGH State NJ Zip Code 08844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 07 / 17 / 2017
Transaction ID : SA11AI.34263
 Amount of Each Receipt this Period 200.00
 Memo Item

B. GROSSO 088, NANCY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 236 LONG HILL RD
 City HILLSBOROUGH State NJ Zip Code 08844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.34264
 Amount of Each Receipt this Period 200.00
 Memo Item

C. GRUND 127, EDWIN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 199 MOHN RD
 City NARROWSBURG State NY Zip Code 12764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11AI.34281
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. GUNTER 221, RUSSELL O, , MR,
Mailing Address 3405 CARLY LN

City WOODBRIDGE	State VA	Zip Code 22192
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
08 / 10 / 2017
Transaction ID : SA11AI.34309

Amount of Each Receipt this Period
100.00

Memo Item

B. GUNTER 221, RUSSELL O, , MR,
Mailing Address 3405 CARLY LN

City WOODBRIDGE	State VA	Zip Code 22192
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
MM / DD / YYYY
11 / 10 / 2017
Transaction ID : SA11AI.34310

Amount of Each Receipt this Period
100.00

Memo Item

C. GUSTAFSON 309, DEAN, , MR,
Mailing Address 1450 GREENE ST APT 307

City AUGUSTA	State GA	Zip Code 30901
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) VOGTLE NUCLEAR PLANT		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
MM / DD / YYYY
08 / 09 / 2017
Transaction ID : SA11AI.34317

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 93 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. GUSTAFSON 309, DEAN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1450 GREENE ST APT 307

City AUGUSTA	State GA	Zip Code 30901
-----------------	-------------	-------------------

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

Name of Employer (for Individual) VOGTLE NUCLEAR PLANT	Occupation (for Individual) MANAGER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2017

Transaction ID : SA11AI.34318

Amount of Each Receipt this Period
105.00

Memo Item

B. HADLEY 435, SUSAN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7150 OAK HILL DR

City SYLVANIA	State OH	Zip Code 43560
------------------	-------------	-------------------

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

Name of Employer (for Individual) OSU DEPT OF DANCE	Occupation (for Individual) PROFESSOR
--	--

Receipt For:
 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
07	/	12	/	2017

Transaction ID : SA11AI.34348

Amount of Each Receipt this Period
100.00

Memo Item

C. HALL 770, GARY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3310 THEYSEN CIR

City HOUSTON	State TX	Zip Code 77080
-----------------	-------------	-------------------

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

Name of Employer (for Individual) HALL-HOUSTON EXPLORATION PARTNERS	Occupation (for Individual) MANAGING PARTNER
--	---

Receipt For:
 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	/	14	/	2017

Transaction ID : SA11AI.34421

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 94 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HALL 770, GARY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3310 THEYSEN CIR

City HOUSTON	State TX	Zip Code 77080
-----------------	-------------	-------------------

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

Name of Employer (for Individual) HALL-HOUSTON EXPLORATION PARTNERS	Occupation (for Individual) MANAGING PARTNER
--	---

Receipt For:
 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
 11 / 13 / 2017
Transaction ID : SA11AI.34422

Amount of Each Receipt this Period
100.00

Memo Item

B. HAMBLET 201, SUSAN HARPER, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 DAVIS AVE SW

City LEESBURG	State VA	Zip Code 20175
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 09 / 28 / 2017
Transaction ID : SA11AI.34445

Amount of Each Receipt this Period
200.00

Memo Item

C. HAMBLET 201, SUSAN HARPER, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 DAVIS AVE SW

City LEESBURG	State VA	Zip Code 20175
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 11 / 29 / 2017
Transaction ID : SA11AI.34446

Amount of Each Receipt this Period
300.00

Memo Item

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 95 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HAMILTON 622, JANICE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 207 MASON LN

City SPARTA	State IL	Zip Code 62286
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		04		2017

Transaction ID : SA11AI.34463

Amount of Each Receipt this Period
50.00

Memo Item

B. HAMILTON 636, THOMAS T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 CAYCE ST

City FARMINGTON	State MO	Zip Code 63640
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2017

Transaction ID : SA11AI.34464

Amount of Each Receipt this Period
50.00

Memo Item

C. HANKEY 747, RAY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 728

City DURANT	State OK	Zip Code 74702
----------------	-------------	-------------------

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

Name of Employer (for Individual) G&H TRUCK EQUIPMENT CO	Occupation (for Individual) DIRECTOR
---	---

Receipt For:
 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		2017

Transaction ID : SA11AI.34501

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 96 OF 274
<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)
TEA PARTY MAJORITY FUND

A. HANSON 970, LLOYD M, , MR,
Mailing Address PO BOX 475

City COLTON	State OR	Zip Code 97017
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
11 / 06 / 2017
Transaction ID : **SA11AI.34539**

Amount of Each Receipt this Period
105.00

Memo Item

B. HANSON 970, LLOYD M, , MR,
Mailing Address PO BOX 475

City COLTON	State OR	Zip Code 97017
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00	

Date of Receipt
11 / 27 / 2017
Transaction ID : **SA11AI.34540**

Amount of Each Receipt this Period
105.00

Memo Item

C. HARDY 381, DONALD L, , MR,
Mailing Address 4051 BLACKHEATH DR

City BARTLETT	State TN	Zip Code 38135
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
10 / 03 / 2017
Transaction ID : **SA11AI.34565**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	260.00
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 97 OF 274
<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)
TEA PARTY MAJORITY FUND

A. HARTENBERGER 758, BARBARA L, , MS,
Mailing Address 631 PRIVATE ROAD 6165

City GRAPELAND	State TX	Zip Code 75844
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
08 / 04 / 2017
Transaction ID : SA11AI.34638

Amount of Each Receipt this Period
300.00

Memo Item

B. HAWKE 752, ROBERT J, , MR,
Mailing Address 8030 FRANKFORD RD APT 310

City DALLAS	State TX	Zip Code 75252
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 15 / 2017
Transaction ID : SA11AI.34684

Amount of Each Receipt this Period
50.00

Memo Item

C. HAYES 299, FORREST D, , MR,
Mailing Address 56 WEXFORD ON THE GRN

City HILTON HEAD ISLAND	State SC	Zip Code 29928
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
12 / 13 / 2017
Transaction ID : SA11AI.34716

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 98 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. HENDERSON 605, JUDITH, , MS,
 Mailing Address 1100 QUEENS CT
 City NAPERVILLE State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 23 / 2017
Transaction ID : SA11AI.34814
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HERR 160, DAVID, , MR,
 Mailing Address 1203 VILLA DR APT B
 City BUTLER State PA Zip Code 16001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 09 / 2017
Transaction ID : SA11AI.34886
 Amount of Each Receipt this Period 200.00
 Memo Item

C. HERRELL 432, MICHAEL K, , MR,
 Mailing Address 157 BUCKEYE CIR
 City COLUMBUS State OH Zip Code 43217
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2017
Transaction ID : SA11AI.34891
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HERRELL 432, MICHAEL K, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 157 BUCKEYE CIR

City COLUMBUS	State OH	Zip Code 43217
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	27	/	2017

Transaction ID : SA11AI.34892

Amount of Each Receipt this Period
50.00

Memo Item

B. HERREMA 494, SHANE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5284 BALDWIN ST

City HUDSONVILLE	State MI	Zip Code 49426
---------------------	-------------	-------------------

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

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

Receipt For:
 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	/	2017

Transaction ID : SA11AI.34894

Amount of Each Receipt this Period
350.00

Memo Item

C. HERREMA 494, SHANE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5284 BALDWIN ST

City HUDSONVILLE	State MI	Zip Code 49426
---------------------	-------------	-------------------

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

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

Receipt For:
 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
11	/	01	/	2017

Transaction ID : SA11AI.34895

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 100 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HIBSHMAN 175, LANDIS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 864 E MAIN ST

City EPHRATA	State PA	Zip Code 17522
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
07		24		2017

Transaction ID : SA11AI.34940

Amount of Each Receipt this Period
50.00

Memo Item

B. HIBSHMAN 175, LANDIS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 864 E MAIN ST

City EPHRATA	State PA	Zip Code 17522
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		06		2017

Transaction ID : SA11AI.34941

Amount of Each Receipt this Period
50.00

Memo Item

C. HICKS 372, SALLY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33 MIDDLEBORO CT

City NASHVILLE	State TN	Zip Code 37215
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		05		2017

Transaction ID : SA11AI.34954

Amount of Each Receipt this Period
50.00

Memo Item

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 101 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HILL 247, JANET R, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4998 ROCK RIVER RD

City ROCK	State WV	Zip Code 24747
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		22		2017

Transaction ID : SA11AI.34989

Amount of Each Receipt this Period
100.00

Memo Item

B. HILTON 296, STEPHEN H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 518 ROPER MOUNTAIN CT

City GREENVILLE	State SC	Zip Code 29615
--------------------	-------------	-------------------

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

Name of Employer (for Individual) HILTON DISPLAYS INC	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 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		13		2017

Transaction ID : SA11AI.35018

Amount of Each Receipt this Period
250.00

Memo Item

C. HILVERS 264, NORMA A, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12479 PULLMAN RD

City PENNSBORO	State WV	Zip Code 26415
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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		25		2017

Transaction ID : SA11AI.35024

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	385.00
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 102 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HILVERS 264, NORMA A, , MS,
Mailing Address 12479 PULLMAN RD

City PENNSBORO	State WV	Zip Code 26415
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

Date of Receipt
12 / 25 / 2017
Transaction ID : SA11AI.35025

Amount of Each Receipt this Period
35.00

Memo Item

B. HOCKETT 828, JOHN W, , MR,
Mailing Address 720 WALTERS ST

City BUFFALO	State WY	Zip Code 82834
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Date of Receipt
11 / 03 / 2017
Transaction ID : SA11AI.35062

Amount of Each Receipt this Period
25.00

Memo Item

C. HOFFMASTER 454, JOYCE E, , MS,
Mailing Address 7790 FREDERICK PIKE

City DAYTON	State OH	Zip Code 45414
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) DAYTON CHILDRENS		Occupation (for Individual) MEDICAL ADMINISTRATOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
12 / 07 / 2017
Transaction ID : SA11AI.35107

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 103 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HOGAN 800, JAMES, , MR,
Mailing Address 8435 S BILOXI CT

City AURORA	State CO	Zip Code 80016
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00	

Date of Receipt
07 / 12 / 2017
Transaction ID : SA11AI.35113

Amount of Each Receipt this Period
205.00

Memo Item

B. HOLLOWAY 920, R E, , ,
Mailing Address 1649 VLADIC LN

City ESCONDIDO	State CA	Zip Code 92027
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt
08 / 17 / 2017
Transaction ID : SA11AI.35160

Amount of Each Receipt this Period
600.00

Memo Item

C. HOLZ 501, ROBERT, , MR,
Mailing Address 1883 277TH ST

City JEFFERSON	State IA	Zip Code 50129
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 202.00	

Date of Receipt
12 / 20 / 2017
Transaction ID : SA11AI.35183

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	905.00
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 104 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. HORN 234, WILLIAM C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 ARAGONA BLVD

City VIRGINIA BCH	State VA	Zip Code 23455
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		02		2017

Transaction ID : SA11AI.35224

Amount of Each Receipt this Period
100.00

Memo Item

B. HORN 234, WILLIAM C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 909 ARAGONA BLVD

City VIRGINIA BCH	State VA	Zip Code 23455
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		02		2017

Transaction ID : SA11AI.35225

Amount of Each Receipt this Period
100.00

Memo Item

C. HOUSTON 770, WILLIAM, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16119 VILLA FONTANA WAY

City HOUSTON	State TX	Zip Code 77068
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		22		2017

Transaction ID : SA11AI.35284

Amount of Each Receipt this Period
205.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	405.00
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 105 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. HUGHES 600, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 S RIVER RD
 City LIBERTYVILLE State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 01 / 2017
Transaction ID : SA11AI.35362
 Amount of Each Receipt this Period 250.00
 Memo Item

B. HUGHES 600, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1510 S RIVER RD
 City LIBERTYVILLE State IL Zip Code 60048
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 11 / 20 / 2017
Transaction ID : SA11AI.35363
 Amount of Each Receipt this Period 250.00
 Memo Item

C. HUGUES 917, RICHARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 540 E FOOTHILL BLVD STE 208
 City SAN DIMAS State CA Zip Code 91773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PLANMEMBER SECURITIES CORP Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 13 / 2017
Transaction ID : SA11AI.35370
 Amount of Each Receipt this Period 205.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 705.00
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 106 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. HULTBERG 973, LEROY W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33270 SE WHITE OAK RD

City CORVALLIS	State OR	Zip Code 97333
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

Transaction ID : SA11AI.35388

Amount of Each Receipt this Period
105.00

Memo Item

B. HUNTER 234, WALLACE R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 CHESOPEIAN TRL

City VIRGINIA BEACH	State VA	Zip Code 23452
------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	06	/	2017

Transaction ID : SA11AI.35413

Amount of Each Receipt this Period
200.00

Memo Item

C. HUSTAD 662, LINDA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12513 FAIRWAY RD

City LEAWOOD	State KS	Zip Code 66209
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2017

Transaction ID : SA11AI.35443

Amount of Each Receipt this Period
205.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	510.00
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 107 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. IFFLAND 317, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 OAK HILL RD

City THOMASVILLE	State GA	Zip Code 31757
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		03		2017

Transaction ID : SA11AI.35481

Amount of Each Receipt this Period
100.00

Memo Item

B. IFFLAND 317, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 406 OAK HILL RD

City THOMASVILLE	State GA	Zip Code 31757
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		02		2017

Transaction ID : SA11AI.35482

Amount of Each Receipt this Period
100.00

Memo Item

C. ILGEN 160, PAUL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 105 ASHLEY LN

City SLIPPERY ROCK	State PA	Zip Code 16057
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) SPORTS R COOL INC	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:
 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
07		03		2017

Transaction ID : SA11AI.35487

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
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 108 OF 274
	<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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. ILGEN 160, PAUL, , MR,		Date of Receipt
Mailing Address 105 ASHLEY LN		<input type="text" value="07"/> / <input type="text" value="21"/> / <input type="text" value="2017"/>
City SLIPPERY ROCK	State PA	Zip Code 16057
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.35488
Name of Employer (for Individual) SPORTS R COOL INC		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="325.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ILGEN 160, PAUL, , MR,		Date of Receipt
Mailing Address 105 ASHLEY LN		<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2017"/>
City SLIPPERY ROCK	State PA	Zip Code 16057
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.35489
Name of Employer (for Individual) SPORTS R COOL INC		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="350.00"/>	Amount of Each Receipt this Period <input type="text" value="25.00"/>
<input type="checkbox"/> Memo Item		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. ILGEN 160, PAUL, , MR,		Date of Receipt
Mailing Address 105 ASHLEY LN		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2017"/>
City SLIPPERY ROCK	State PA	Zip Code 16057
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.35490
Name of Employer (for Individual) SPORTS R COOL INC		Occupation (for Individual) OWNER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	Amount of Each Receipt this Period <input type="text" value="50.00"/>
<input type="checkbox"/> Memo Item		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="175.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 109 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. ISHIZUKA 105, YUKIO, , MR,
Mailing Address 500 PURCHASE ST

City RYE	State NY	Zip Code 10580
-------------	-------------	-------------------

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

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

Receipt For:
 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 / 18 / 2017
Transaction ID : SA11AI.35531

Amount of Each Receipt this Period
100.00

Memo Item

B. IZBICKI 982, CHERYL, , MS,
Mailing Address 4704 115TH PL SE

City EVERETT	State WA	Zip Code 98208
-----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2017
Transaction ID : SA11AI.35546

Amount of Each Receipt this Period
60.00

Memo Item

C. JANZEN 807, ARVIN, , MR,
Mailing Address 203 EDISON ST

City BRUSH	State CO	Zip Code 80723
---------------	-------------	-------------------

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

Name of Employer (for Individual) A&R AUTOMOTIVE	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 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
 07 / 19 / 2017
Transaction ID : SA11AI.35609

Amount of Each Receipt this Period
400.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	560.00
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 110 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. JANZEN 807, ARVIN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 EDISON ST
 City BRUSH State CO Zip Code 80723
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A&R AUTOMOTIVE Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2017
Transaction ID : SA11AI.35610
 Amount of Each Receipt this Period
 400.00
 Memo Item

B. JANZEN 970, PAMELA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 160
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : SA11AI.35611
 Amount of Each Receipt this Period
 80.00
 Memo Item

C. JANZEN 970, PAMELA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 160
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 395.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 04 / 2017
Transaction ID : SA11AI.35612
 Amount of Each Receipt this Period
 110.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	590.00
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 111 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. JANZEN 970, PAMELA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 160
 City SANDY State OR Zip Code 97055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 12 / 29 / 2017
Transaction ID : SA11AI.35613
 Amount of Each Receipt this Period
 205.00
 Memo Item

B. JOHNSON 334, PATSY S, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 751 ISLAND DR
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : SA11AI.35707
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. JOHNSON 334, PATSY S, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 751 ISLAND DR
 City PALM BEACH State FL Zip Code 33480
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 09 / 2017
Transaction ID : SA11AI.35708
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1005.00
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 112 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. JOHNSON 334, PATSY S, , MS,
Mailing Address 751 ISLAND DR

City PALM BEACH	State FL	Zip Code 33480
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2200.00	

Date of Receipt
MM / DD / YYYY
10 / 20 / 2017
Transaction ID : SA11AI.35709

Amount of Each Receipt this Period
300.00

Memo Item

B. JOHNSON 460, ERIC, , MR,
Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017
Transaction ID : SA11AI.35718

Amount of Each Receipt this Period
500.00

Memo Item

C. JOHNSON 460, ERIC, , MR,
Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 800.00	

Date of Receipt
MM / DD / YYYY
08 / 28 / 2017
Transaction ID : SA11AI.35719

Amount of Each Receipt this Period
300.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. JOHNSON 460, ERIC, , MR,
 Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1400.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2017
Transaction ID : SA11AI.35720

Amount of Each Receipt this Period
 600.00

Memo Item

B. JOHNSON 460, ERIC, , MR,
 Mailing Address 837 S PARK TRAIL DR

City CARMEL	State IN	Zip Code 46032
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1900.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 01 / 2017
Transaction ID : SA11AI.35721

Amount of Each Receipt this Period
 500.00

Memo Item

C. JONES 432, JOHN R, , MR,
 Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JONES BUELL COMPANY		Occupation (for Individual) MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 675.00	

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 04 / 2017
Transaction ID : SA11AI.35813

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 114 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. JONES 432, JOHN R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) JONES BUELL COMPANY	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

Transaction ID : SA11AI.35814

Amount of Each Receipt this Period
100.00

Memo Item

B. JONES 432, JOHN R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) JONES BUELL COMPANY	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1075.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		18		2017

Transaction ID : SA11AI.35815

Amount of Each Receipt this Period
300.00

Memo Item

C. JONES 432, JOHN R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 350 FRANK RD

City COLUMBUS	State OH	Zip Code 43207
------------------	-------------	-------------------

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

Name of Employer (for Individual) JONES BUELL COMPANY	Occupation (for Individual) MANAGER
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		06		2017

Transaction ID : SA11AI.35816

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 115 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. JONES 432, JOHN R, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 350 FRANK RD
 City COLUMBUS State OH Zip Code 43207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JONES BUELL COMPANY Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1275.00

Date of Receipt 12 / 18 / 2017
Transaction ID : SA11AI.35817
 Amount of Each Receipt this Period 100.00
 Memo Item

B. JONES 785, KENNETH, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 913 E 11TH ST
 City MISSION State TX Zip Code 78572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KEN JONES CONSTRUCTION CO Occupation (for Individual) BUILDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 18 / 2017
Transaction ID : SA11AI.35842
 Amount of Each Receipt this Period 200.00
 Memo Item

C. JORDAN 740, TONY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10139 BONNEY BRIDGE RD
 City OWASSO State OK Zip Code 74055
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TONY JORDAN BUILDING CO INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 07 / 26 / 2017
Transaction ID : SA11AI.35863
 Amount of Each Receipt this Period 250.00
 Memo Item

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: PAGE 116 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. KASTER 327, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 514 DONALDSON DR
 City DEBARY State FL Zip Code 32713
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 12 / 2017
Transaction ID : SA11AI.35953
 Amount of Each Receipt this Period 100.00
 Memo Item

B. KEENEY 231, LAVONNA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 139 WINSTON DR
 City WILLIAMSBURG State VA Zip Code 23185
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 14 / 2017
Transaction ID : SA11AI.35999
 Amount of Each Receipt this Period 50.00
 Memo Item

C. KELTNER 740, DARRELL, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2701 CLAREMONT DR
 City BARTLESVILLE State OK Zip Code 74006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 20 / 2017
Transaction ID : SA11AI.36059
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
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 117 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. KERASOTES 627, DENIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 31 FAIRVIEW LANE
 City SPRINGFIELD State IL Zip Code 62711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2017
Transaction ID : SA11AI.44363
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. KERN 972, MARY B, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5706 SE 44TH AVE
 City PORTLAND State OR Zip Code 97206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2017
Transaction ID : SA11AI.36102
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. KEYLON 374, DEIDRE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6845 LONGVIEW RD
 City CHATTANOOGA State TN Zip Code 37421
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HAMILTON CO GOV Occupation (for Individual) CUSTOMER SERVICE
 Receipt For: 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 / 22 / 2017
Transaction ID : SA11AI.36128
 Amount of Each Receipt this Period
 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	425.00
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 118 OF 274
	<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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KEYLON 374, DEIDRE, , MS,			Date of Receipt M M / D D / Y Y Y Y Y 10 / 23 / 2017
Mailing Address 6845 LONGVIEW RD			Transaction ID : SA11Al.36129
City CHATTANOOGA	State TN	Zip Code 37421	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) HAMILTON CO GOV		Occupation (for Individual) CUSTOMER SERVICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KIDDER 424, KATHERINE D, , MS,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 20 / 2017
Mailing Address 230 SHAMROCK DR			Transaction ID : SA11Al.36133
City MADISONVILLE	State KY	Zip Code 42431	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KIDDER 424, KATHERINE D, , MS,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 28 / 2017
Mailing Address 230 SHAMROCK DR			Transaction ID : SA11Al.36134
City MADISONVILLE	State KY	Zip Code 42431	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 290.00	

SUBTOTAL of Receipts This Page (optional).....	160.00
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 119 OF 274
	(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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. KIMBALL 985, MORTON, , MR,

Mailing Address 13431 SOLBERG RD SE

City YELM	State WA	Zip Code 98597
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		05		2017

Transaction ID : SA11AI.36150

Amount of Each Receipt this Period
100.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. KINAST 331, GISELA, , MS,

Mailing Address 19925 NE 39TH PL
APT 604S

City MIAMI	State FL	Zip Code 33180
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		03		2017

Transaction ID : SA11AI.36153

Amount of Each Receipt this Period
200.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KING 439, FRANCES E, , MS,

Mailing Address 3106 SAINT CHARLES DR

City STEUBENVILLE	State OH	Zip Code 43952
----------------------	-------------	-------------------

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

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

Receipt For:
 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		14		2017

Transaction ID : SA11AI.36169

Amount of Each Receipt this Period
100.00

Memo Item

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:	PAGE 120 OF 274
	(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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KIPP 951, LLOYD, , MR,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 16 / 2017
Mailing Address 1625 THE ALAMEDA STE 707		Transaction ID : SA11AI.36200
City SAN JOSE	State CA	Zip Code 95126
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer (for Individual) NONE	Occupation (for Individual) SELF EMPLOYED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KNICKERBOCKER 496, MUSA, , MRS,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 07 / 07 / 2017
Mailing Address 318 COUNTY LINE RD W		Transaction ID : SA11AI.36307
City MANISTEE	State MI	Zip Code 49660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ANESTHETIST	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KNICKERBOCKER 496, MUSA, , MRS,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 12 / 2017
Mailing Address 318 COUNTY LINE RD W		Transaction ID : SA11AI.36308
City MANISTEE	State MI	Zip Code 49660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 55.00
Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) ANESTHETIST	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 315.00	

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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 121 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. KNIGHT 476, BEVERLY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1502 N COUNTY ROAD 825 W

City HAZLETON	State IN	Zip Code 47640
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 02 / 2017
Transaction ID : SA11AI.36315

Amount of Each Receipt this Period
 200.00

Memo Item

B. KNIGHT 755, HERB, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 COUNTY ROAD 4420

City ANNONA	State TX	Zip Code 75550
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 14 / 2017
Transaction ID : SA11AI.36318

Amount of Each Receipt this Period
 30.00

Memo Item

C. KNIGHT 755, HERB, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 COUNTY ROAD 4420

City ANNONA	State TX	Zip Code 75550
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2017
Transaction ID : SA11AI.36319

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	255.00
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 122 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. KNIGHT 755, HERB, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1050 COUNTY ROAD 4420
 City ANNONA State TX Zip Code 75550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 11 / 10 / 2017
Transaction ID : SA11AI.36320
 Amount of Each Receipt this Period 25.00
 Memo Item

B. KOCHER 190, THOMAS H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3426 BRUNSWICK AVE
 City DREXEL HILL State PA Zip Code 19026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 12 / 11 / 2017
Transaction ID : SA11AI.36353
 Amount of Each Receipt this Period 100.00
 Memo Item

C. KOCHISS 062, JOHN L, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 88 EAGER RD
 City FRANKLIN State CT Zip Code 06254
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 09 / 19 / 2017
Transaction ID : SA11AI.36358
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 123 OF 274
<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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. KOERBER 631, KENNETH, , MR,		Date of Receipt
Mailing Address 4552 TOWNE CENTRE DR		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2017"/>
City SAINT LOUIS	State MO	Zip Code 63128
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.36365
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="255.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. KOETHER 333, BERNARD, , MR,		Date of Receipt
Mailing Address 757 SW 17TH ST SUITE 1074		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2017"/>
City FORT LAUDERDALE	State FL	Zip Code 33316
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.36367
Name of Employer (for Individual) TECHNOLOGY LICENSING CO		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) PRESIDENT		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. KROPP 103, WESLEY W, , MR,		Date of Receipt
Mailing Address 9 COURT ST		<input type="text" value="11"/> / <input type="text" value="27"/> / <input type="text" value="2017"/>
City STATEN ISLAND	State NY	Zip Code 10304
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.36510
Name of Employer (for Individual) NONE		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) RETIRED		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="300.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

**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 124 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. KURZET 926, ANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33762 VALLE RD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		21		2017

Transaction ID : SA11AI.36569

Amount of Each Receipt this Period
250.00

Memo Item

B. KURZET 926, ANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 33762 VALLE RD

City SAN JUAN CAPISTRAN	State CA	Zip Code 92675
----------------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		20		2017

Transaction ID : SA11AI.36570

Amount of Each Receipt this Period
250.00

Memo Item

C. LAMBERT 484, MARY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10325 RUSTIC RIDGE LN

City FENTON	State MI	Zip Code 48430
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		07		2017

Transaction ID : SA11AI.36629

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	605.00
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 125 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. LANE 740, JOE C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City CHELSEA	State OK	Zip Code 74016
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		22		2017

Transaction ID : SA11AI.36655

Amount of Each Receipt this Period
500.00

Memo Item

B. LANE 740, JOE C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 66

City CHELSEA	State OK	Zip Code 74016
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
755.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

Transaction ID : SA11AI.36656

Amount of Each Receipt this Period
255.00

Memo Item

C. LANGFIELD 801, VINCE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10677 W TUFTS PL

City LITTLETON	State CO	Zip Code 80127
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		2017

Transaction ID : SA11AI.36676

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	955.00
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 126 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. LANKHEIM 349, RAYMOND M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 84 SW LINDEN ST

City STUART	State FL	Zip Code 34997
----------------	-------------	-------------------

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

Name of Employer (for Individual) EPSILON VINEYARDS	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 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
10		03		2017

Transaction ID : SA11AI.36688

Amount of Each Receipt this Period
150.00

Memo Item

B. LANKHEIM 349, RAYMOND M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 84 SW LINDEN ST

City STUART	State FL	Zip Code 34997
----------------	-------------	-------------------

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

Name of Employer (for Individual) EPSILON VINEYARDS	Occupation (for Individual) BUSINESS OWNER
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		12		2017

Transaction ID : SA11AI.36689

Amount of Each Receipt this Period
150.00

Memo Item

C. LAPP 175, SAMUEL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 130 OCTORARA TRL

City GAP	State PA	Zip Code 17527
-------------	-------------	-------------------

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

Name of Employer (for Individual) LAPP PAVING COMPANY	Occupation (for Individual) PRESIDENT
--	--

Receipt For:
 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
11		21		2017

Transaction ID : SA11AI.36698

Amount of Each Receipt this Period
350.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	650.00
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 127 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. LARSON 838, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 E CAMERON AVE
 City KELLOGG State ID Zip Code 83837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **07 / 25 / 2017**
Transaction ID : SA11AI.36711
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LASKA 319, JOHN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6818 GAINES CREEK RD
 City COLUMBUS State GA Zip Code 31904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 08 / 2017**
Transaction ID : SA11AI.36722
 Amount of Each Receipt this Period 200.00
 Memo Item

C. LATACKI 442, TARUS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HONEYCHUCK LN
 City KENT State OH Zip Code 44240
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 10 / 2017**
Transaction ID : SA11AI.36729
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. LAVOR 857, IRENE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3650 N CAMINO OJO DE AGUA

City TUCSON	State AZ	Zip Code 85749
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	13	/	2017

Transaction ID : SA11AI.36754

Amount of Each Receipt this Period
75.00

Memo Item

B. LEACH 773, SARA B, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3002 HEATHERPARK DR

City KINGWOOD	State TX	Zip Code 77345
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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	/	18	/	2017

Transaction ID : SA11AI.36793

Amount of Each Receipt this Period
50.00

Memo Item

C. LEACH 773, SARA B, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3002 HEATHERPARK DR

City KINGWOOD	State TX	Zip Code 77345
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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	/	2017

Transaction ID : SA11AI.36794

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	175.00
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 129 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. LEACH 773, SARA B, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3002 HEATHERPARK DR

City KINGWOOD	State TX	Zip Code 77345
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
11	/	27	/	2017

Transaction ID : SA11AI.36795

Amount of Each Receipt this Period
100.00

Memo Item

B. LEACH 773, SARA B, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3002 HEATHERPARK DR

City KINGWOOD	State TX	Zip Code 77345
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
12	/	27	/	2017

Transaction ID : SA11AI.36796

Amount of Each Receipt this Period
50.00

Memo Item

C. LEFEVRE 850, MARY ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6544 N 7TH AVE
UNIT 9

City PHOENIX	State AZ	Zip Code 85013
-----------------	-------------	-------------------

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

Name of Employer (for Individual) LABORATORY SCIENCES OF ARIZONA	Occupation (for Individual) MEDICAL
---	--

Receipt For:
 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
12	/	15	/	2017

Transaction ID : SA11AI.36844

Amount of Each Receipt this Period
100.00

Memo Item

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:	PAGE 130 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. LEHR 119, JANET, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 68 PARK PL

City EAST HAMPTON	State NY	Zip Code 11937
----------------------	-------------	-------------------

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

Name of Employer (for Individual) JANET LEHR FINE ARTS	Occupation (for Individual) GALLERIST
---	--

Receipt For:
 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		03		2017

Transaction ID : SA11AI.36861

Amount of Each Receipt this Period
250.00

Memo Item

B. LEWIS 959, SHIRLEY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12634 GIANELLA RD

City CHICO	State CA	Zip Code 95973
---------------	-------------	-------------------

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

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

Receipt For:
 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
10		05		2017

Transaction ID : SA11AI.36944

Amount of Each Receipt this Period
100.00

Memo Item

C. LEWIS 959, SHIRLEY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12634 GIANELLA RD

City CHICO	State CA	Zip Code 95973
---------------	-------------	-------------------

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

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

Receipt For:
 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
11		13		2017

Transaction ID : SA11AI.36945

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 131 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. LIPSCOMB 265, RYAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 333
 City REEDSVILLE State WV Zip Code 26547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 07 / 31 / 2017
Transaction ID : SA11Al.37013
 Amount of Each Receipt this Period 100.00
 Memo Item

B. LIPSCOMB 265, RYAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 333
 City REEDSVILLE State WV Zip Code 26547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 09 / 19 / 2017
Transaction ID : SA11Al.37014
 Amount of Each Receipt this Period 100.00
 Memo Item

C. LIPSCOMB 265, RYAN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 333
 City REEDSVILLE State WV Zip Code 26547
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 19 / 2017
Transaction ID : SA11Al.37015
 Amount of Each Receipt this Period 100.00
 Memo Item

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 132 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. LOMBARDI 170, DAVE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 CENTER DR

City CAMP HILL	State PA	Zip Code 17011
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		03		2017

Transaction ID : SA11AI.37065

Amount of Each Receipt this Period
100.00

Memo Item

B. LOMBARDI 170, DAVE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 CENTER DR

City CAMP HILL	State PA	Zip Code 17011
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		03		2017

Transaction ID : SA11AI.37066

Amount of Each Receipt this Period
100.00

Memo Item

C. LUTTIO 995, KATHRYN K, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 251 MCCARREY ST
UNIT 25C

City ANCHORAGE	State AK	Zip Code 99508
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
10		02		2017

Transaction ID : SA11AI.37199

Amount of Each Receipt this Period
100.00

Memo Item

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 133 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MADERA 781, LELA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 187 GEORGE STRAIT
 City CANYON LAKE State TX Zip Code 78133
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **10 / 05 / 2017**
Transaction ID : SA11AI.37265
 Amount of Each Receipt this Period 350.00
 Memo Item

B. MAGNUSON 852, MAMIE, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7255 E BROADWAY RD APT 246
 City MESA State AZ Zip Code 85208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **12 / 11 / 2017**
Transaction ID : SA11AI.37291
 Amount of Each Receipt this Period 50.00
 Memo Item

C. MAINE 486, JACK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3132 WEISS ST
 City SAGINAW State MI Zip Code 48605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt **10 / 06 / 2017**
Transaction ID : SA11AI.37307
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 134 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MAINE 486, JACK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3132 WEISS ST

City SAGINAW	State MI	Zip Code 48605
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2017

Transaction ID : SA11AI.37308

Amount of Each Receipt this Period
50.00

Memo Item

B. MALAFIS 112, KAY G, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 143 80TH ST

City BROOKLYN	State NY	Zip Code 11209
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	28	/	2017

Transaction ID : SA11AI.37318

Amount of Each Receipt this Period
100.00

Memo Item

C. MARCH 912, JAMIE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1024 CALLE CONTENTO

City GLENDALE	State CA	Zip Code 91208
------------------	-------------	-------------------

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

Name of Employer (for Individual) PARKER-ANDERSON CO	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 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	/	10	/	2017

Transaction ID : SA11AI.37384

Amount of Each Receipt this Period
100.00

Memo Item

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 135 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MARCH 912, JAMIE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1024 CALLE CONTENTO
 City GLENDALE State CA Zip Code 91208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PARKER-ANDERSON CO Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 09 / 2017
Transaction ID : SA11AI.37385
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MAREK 141, JOE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2075 DARLING RD
 City SOUTH WALES State NY Zip Code 14139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 08 / 09 / 2017
Transaction ID : SA11AI.37388
 Amount of Each Receipt this Period 55.00
 Memo Item

C. MAREK 141, JOE, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2075 DARLING RD
 City SOUTH WALES State NY Zip Code 14139
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 10 / 04 / 2017
Transaction ID : SA11AI.37389
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	205.00
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 136 OF 274
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MARTIN 978, STEVE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 973

City BAKER CITY	State OR	Zip Code 97814
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		04		2017

Transaction ID : SA11AI.37476

Amount of Each Receipt this Period
50.00

Memo Item

B. MATHEWS 317, JACQUELINE L, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 195 LITTLE RIVER LN

City MOULTRIE	State GA	Zip Code 31788
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
09		22		2017

Transaction ID : SA11AI.37522

Amount of Each Receipt this Period
350.00

Memo Item

C. MAXWELL 928, MARK A, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2124 W PALM AVE

City ORANGE	State CA	Zip Code 92868
----------------	-------------	-------------------

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

Name of Employer (for Individual) AUTO CLUB OF SO CALIFORNIA	Occupation (for Individual) UNDERWRITING INSPECTOR
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
201.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

Transaction ID : SA11AI.44407

Amount of Each Receipt this Period
20.16

Memo Item

SUBTOTAL of Receipts This Page (optional).....	420.16
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 137 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MAXWELL 928, MARK A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2124 W PALM AVE
 City ORANGE State CA Zip Code 92868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTO CLUB OF SO CALIFORNIA Occupation (for Individual) UNDERWRITING INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 221.76

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44408
 Amount of Each Receipt this Period 20.16
 Memo Item

B. MAXWELL 928, MARK A, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2124 W PALM AVE
 City ORANGE State CA Zip Code 92868
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AUTO CLUB OF SO CALIFORNIA Occupation (for Individual) UNDERWRITING INSPECTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 241.92

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44409
 Amount of Each Receipt this Period 20.16
 Memo Item

C. MCCARTHY 797, REBECCA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 ROBIN LN
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIMITIVE PETROLEOM INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 09 / 11 / 2017
Transaction ID : SA11AI.37604
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 140.32
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 138 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCCARTHY 797, REBECCA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4514 ROBIN LN
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PRIMITIVE PETROLEOM INC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt **12 / 11 / 2017**
Transaction ID : SA11AI.37605
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCCLEAN 680, ALEX, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1035 COUNTY ROAD T
 City FREMONT State NE Zip Code 68025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **08 / 25 / 2017**
Transaction ID : SA11AI.37616
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCCLINTIC 195, PATRICIA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 106 RONALD AVE
 City BIRDSBORO State PA Zip Code 19508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **09 / 04 / 2017**
Transaction ID : SA11AI.37624
 Amount of Each Receipt this Period 50.00
 Memo Item

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 139 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCCLINTIC 195, PATRICIA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 106 RONALD AVE

City BIRDSBORO	State PA	Zip Code 19508
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12	/	04	/	2017

Transaction ID : SA11AI.37625

Amount of Each Receipt this Period
50.00

Memo Item

B. MCCONNAUGHY 007, MARGARET, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3000

City COAMO	State PR	Zip Code 00769
---------------	-------------	-------------------

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

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

Receipt For:
 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	/	07	/	2017

Transaction ID : SA11AI.37639

Amount of Each Receipt this Period
50.00

Memo Item

C. MCCONNAUGHY 007, MARGARET, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 3000

City COAMO	State PR	Zip Code 00769
---------------	-------------	-------------------

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

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

Receipt For:
 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
12	/	07	/	2017

Transaction ID : SA11AI.37640

Amount of Each Receipt this Period
50.00

Memo Item

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:	PAGE 140 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. MCCOY 562, DANIEL E, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 409

City MARSHALL	State MN	Zip Code 56258
------------------	-------------	-------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) TAX PREPARER
--	---

Receipt For:
 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
11		15		2017

Transaction ID : SA11AI.37659

Amount of Each Receipt this Period
100.00

Memo Item

B. MCCOY 666, LARRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2920 NW SPROATON LN

City TOPEKA	State KS	Zip Code 66617
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2017

Transaction ID : SA11AI.37660

Amount of Each Receipt this Period
100.00

Memo Item

C. MCDONALD 774, BARBARA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1809 HAWTHORN DR

City RICHMOND	State TX	Zip Code 77469
------------------	-------------	-------------------

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

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

Receipt For:
 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
07		24		2017

Transaction ID : SA11AI.37687

Amount of Each Receipt this Period
100.00

Memo Item

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 141 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MCDONALD 774, BARBARA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORN DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 09 / 15 / 2017
Transaction ID : SA11AI.37688
 Amount of Each Receipt this Period 100.00
 Memo Item

B. MCDONALD 774, BARBARA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORN DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 12 / 2017
Transaction ID : SA11AI.44420
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCDONALD 774, BARBARA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1809 HAWTHORN DR
 City RICHMOND State TX Zip Code 77469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) TEACHER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 11 / 15 / 2017
Transaction ID : SA11AI.37689
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00
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 142 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCGOLERICK 217, KENNETH, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7203 E SUNDOWN CT

City FREDERICK	State MD	Zip Code 21702
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		07		2017

Transaction ID : SA11AI.37742

Amount of Each Receipt this Period
105.00

Memo Item

B. MCINERNEY 890, REGINA M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 706

City INDIAN SPGS	State NV	Zip Code 89018
---------------------	-------------	-------------------

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

Name of Employer (for Individual) PAE	Occupation (for Individual) SECURITY OFFICER
--	---

Receipt For:
 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
10		23		2017

Transaction ID : SA11AI.37759

Amount of Each Receipt this Period
300.00

Memo Item

C. MCINTIRE 370, JEFF, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5414 MORGAN CREEK RD

City CENTERVILLE	State TN	Zip Code 37033
---------------------	-------------	-------------------

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

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

Receipt For:
 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
10		04		2017

Transaction ID : SA11AI.37761

Amount of Each Receipt this Period
60.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	465.00
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 143 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MCINTIRE 370, JEFF, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5414 MORGAN CREEK RD
 City CENTERVILLE State TN Zip Code 37033
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 11 / 23 / 2017
Transaction ID : SA11AI.37762
 Amount of Each Receipt this Period 60.00
 Memo Item

B. MCINTOSH 988, ANITA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10187 HARRIS RD NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 10 / 2017
Transaction ID : SA11AI.37766
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCINTOSH 988, ANITA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10187 HARRIS RD NE
 City MOSES LAKE State WA Zip Code 98837
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 04 / 2017
Transaction ID : SA11AI.37767
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 260.00
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 144 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCKENNA 801, GREG, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5954 WOOD SORREL WAY
 City LITTLETON State CO Zip Code 80123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 28 / 2017
Transaction ID : SA11AI.37785
 Amount of Each Receipt this Period 300.00
 Memo Item

B. MCKENNA 801, GREG, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5954 WOOD SORREL WAY
 City LITTLETON State CO Zip Code 80123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 26 / 2017
Transaction ID : SA11AI.37786
 Amount of Each Receipt this Period 500.00
 Memo Item

C. MCKEON 180, JOAN M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1594 WEYHILL CIR
 City BETHLEHEM State PA Zip Code 18015
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 23 / 2017
Transaction ID : SA11AI.37797
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 145 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCMAHON 874, N GEOFF, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2427
 City FARMINGTON State NM Zip Code 87499
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MORNING STAR MINERALS Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **07 / 03 / 2017**
Transaction ID : SA11AI.37826
 Amount of Each Receipt this Period 250.00
 Memo Item

B. MCSPADDEN 920, KAREN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 GLENDORA DR
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 21 / 2017**
Transaction ID : SA11AI.37856
 Amount of Each Receipt this Period 100.00
 Memo Item

C. MCSPADDEN 920, KAREN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 980 GLENDORA DR
 City OCEANSIDE State CA Zip Code 92057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **12 / 21 / 2017**
Transaction ID : SA11AI.37857
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 146 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MCWILLIAMS 307, MARK K, , MR,
Mailing Address 3074 W ARMUCHEE RD

City SUMMERVILLE	State GA	Zip Code 30747
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MCWILLIAMS FARM		Occupation (for Individual) FARMER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
12 / 14 / 2017
Transaction ID : SA11AI.37870

Amount of Each Receipt this Period
100.00

Memo Item

B. MEDNICK 548, JAN, , MS,
Mailing Address N13431 COUNTY LINE RD

City MINONG	State WI	Zip Code 54859
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00

Date of Receipt
10 / 04 / 2017
Transaction ID : SA11AI.37888

Amount of Each Receipt this Period
40.00

Memo Item

C. MEDNICK 548, JAN, , MS,
Mailing Address N13431 COUNTY LINE RD

City MINONG	State WI	Zip Code 54859
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 285.00

Date of Receipt
11 / 01 / 2017
Transaction ID : SA11AI.37889

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	180.00
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 147 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MEDNICK 548, JAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address N13431 COUNTY LINE RD

City MINONG	State WI	Zip Code 54859
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2017

Transaction ID : SA11AI.37890

Amount of Each Receipt this Period
55.00

Memo Item

B. MEIBERGEN 737, LEW L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1508 OAKHILL CIR

City ENID	State OK	Zip Code 73703
--------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	26	/	2017

Transaction ID : SA11AI.37905

Amount of Each Receipt this Period
200.00

Memo Item

C. MEYER 553, TODD W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21821 INDUSTRIAL BLVD

City ROGERS	State MN	Zip Code 55374
----------------	-------------	-------------------

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

Name of Employer (for Individual) TWM CONSULTING	Occupation (for Individual) MANAGEMENT CONSULTANT
---	--

Receipt For:
 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	/	13	/	2017

Transaction ID : SA11AI.37993

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.00
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 148 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MIKOLOSKI 210, DOROTHY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 353 GATEWATER CT

City GLEN BURNIE	State MD	Zip Code 21060
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	13	/	2017

Transaction ID : SA11AI.38039

Amount of Each Receipt this Period
80.00

Memo Item

B. MIKOLOSKI 210, DOROTHY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 353 GATEWATER CT

City GLEN BURNIE	State MD	Zip Code 21060
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
310.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2017

Transaction ID : SA11AI.38040

Amount of Each Receipt this Period
105.00

Memo Item

C. MILAVEC 870, VINCENT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 58 MOLINA RD

City PERALTA	State NM	Zip Code 87042
-----------------	-------------	-------------------

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

Name of Employer (for Individual) MILAVEC REALTY INC	Occupation (for Individual) REALTOR
---	--

Receipt For:
 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
11	/	06	/	2017

Transaction ID : SA11AI.38046

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	435.00
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 149 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MILLAR 305, JOAN P, , MS,
Mailing Address 6320 BRADY RD

City MURRAYVILLE	State GA	Zip Code 30564
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2017
Transaction ID : SA11AI.38059

Amount of Each Receipt this Period
100.00

Memo Item

B. MILLER 467, DAVID N, , MR,
Mailing Address 940 LAKESIDE DR

City ROME CITY	State IN	Zip Code 46784
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SILVER BAY REALTY CORP		Occupation (for Individual) CONSULTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2017
Transaction ID : SA11AI.38089

Amount of Each Receipt this Period
100.00

Memo Item

C. MILLER 467, DAVID N, , MR,
Mailing Address 940 LAKESIDE DR

City ROME CITY	State IN	Zip Code 46784
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SILVER BAY REALTY CORP		Occupation (for Individual) CONSULTANT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
12 / 13 / 2017
Transaction ID : SA11AI.38090

Amount of Each Receipt this Period
100.00

Memo Item

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 150 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MISHNICK 780, MARK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6628 STATE HIGHWAY 27

City COMFORT	State TX	Zip Code 78013
-----------------	-------------	-------------------

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

Name of Employer (for Individual) ABBOTT LABORATORIES	Occupation (for Individual) SENIOR MANAGER
--	---

Receipt For:
 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
11	/	22	/	2017

Transaction ID : SA11AI.38170

Amount of Each Receipt this Period
100.00

Memo Item

B. MOFFITT 273, TERRY W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6573 BUFFALO FORD RD

City RAMSEUR	State NC	Zip Code 27316
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	20	/	2017

Transaction ID : SA11AI.38201

Amount of Each Receipt this Period
100.00

Memo Item

C. MOHR 993, CHARLES J, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1440 AGNES ST

City RICHLAND	State WA	Zip Code 99352
------------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2017

Transaction ID : SA11AI.38208

Amount of Each Receipt this Period
305.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	505.00
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 151 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. MOORE 015, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 HAMMEROCK RD

City CHARLTON	State MA	Zip Code 01507
------------------	-------------	-------------------

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

Name of Employer (for Individual) TRI-VALLEY	Occupation (for Individual) MANAGER
---	--

Receipt For:
 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
 11 / 13 / 2017
Transaction ID : SA11AI.38248

Amount of Each Receipt this Period
 100.00

Memo Item

B. MOORE 265, ALLEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3366 JAKES RUN RD

City RIVESVILLE	State WV	Zip Code 26588
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 20 / 2017
Transaction ID : SA11AI.38262

Amount of Each Receipt this Period
 100.00

Memo Item

C. MOORE 265, ALLEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3366 JAKES RUN RD

City RIVESVILLE	State WV	Zip Code 26588
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 12 / 20 / 2017
Transaction ID : SA11AI.38263

Amount of Each Receipt this Period
 100.00

Memo Item

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 152 OF 274
<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)
TEA PARTY MAJORITY FUND

A. MORELLO 113, JOSEPH, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6335 74TH ST

City MIDDLE VLG	State NY	Zip Code 11379
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 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
11	/	16	/	2017

Transaction ID : SA11AI.38302

Amount of Each Receipt this Period
100.00

Memo Item

B. MORRIS 176, SHIRLEY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 ELIZABETH DR

City LANCASTER	State PA	Zip Code 17601
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	28	/	2017

Transaction ID : SA11AI.38345

Amount of Each Receipt this Period
100.00

Memo Item

C. MORRIS 176, SHIRLEY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 ELIZABETH DR

City LANCASTER	State PA	Zip Code 17601
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	28	/	2017

Transaction ID : SA11AI.38346

Amount of Each Receipt this Period
100.00

Memo Item

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 153 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. MOSS 874, DARCI, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 16876 US 550

City AZTEC	State NM	Zip Code 87410
---------------	-------------	-------------------

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

Name of Employer (for Individual) ULTRA PETROLEUM INC	Occupation (for Individual) ENGINEER
--	---

Receipt For:
 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		09		2017

Transaction ID : SA11AI.38403

Amount of Each Receipt this Period
100.00

Memo Item

B. MOTES 936, ROBYN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2572 SANTA CRUZ AVE

City SANGER	State CA	Zip Code 93657
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2017

Transaction ID : SA11AI.38404

Amount of Each Receipt this Period
205.00

Memo Item

C. MUELLER 453, JEAN, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 14516 COBLE RD

City YORKSHIRE	State OH	Zip Code 45388
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		20		2017

Transaction ID : SA11AI.38441

Amount of Each Receipt this Period
155.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	460.00
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 154 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. MYNSBERGE 465, MICHAEL A, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 135 RAY ST
 City MISHAWAKA State IN Zip Code 46544
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2017
Transaction ID : SA11AI.38571
 Amount of Each Receipt this Period 50.00
 Memo Item

B. NALLY 911, TERESA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1265 S GRAND AVE
 City PASADENA State CA Zip Code 91105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 02 / 2017
Transaction ID : SA11AI.38582
 Amount of Each Receipt this Period 300.00
 Memo Item

C. NEUBURGER 956, STEPHEN C, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 640 CINNABAR CT
 City ROSEVILLE State CA Zip Code 95678
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 21 / 2017
Transaction ID : SA11AI.38691
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 155 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. NEUBURGER 956, STEPHEN C, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 640 CINNABAR CT

City ROSEVILLE	State CA	Zip Code 95678
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	10	/	2017

Transaction ID : SA11AI.38692

Amount of Each Receipt this Period
100.00

Memo Item

B. NEWSOM 372, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 997 TODD PREIS DR

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	20	/	2017

Transaction ID : SA11AI.38715

Amount of Each Receipt this Period
100.00

Memo Item

C. NEWSOM 372, CHARLES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 997 TODD PREIS DR

City NASHVILLE	State TN	Zip Code 37221
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2017

Transaction ID : SA11AI.38716

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	255.00
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 156 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. NORDGREN 880, ELENA, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 502

City HILLSBORO	State NM	Zip Code 88042
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 25 / 2017

Transaction ID : SA11AI.38789

Amount of Each Receipt this Period
 40.00

Memo Item

B. NORTHRUP 342, JOANNE Q, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4634 MIRADA WAY
 UNIT 11

City SARASOTA	State FL	Zip Code 34238
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 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
 11 / 09 / 2017

Transaction ID : SA11AI.38819

Amount of Each Receipt this Period
 125.00

Memo Item

C. NOWICKI 075, CONRAD J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 GENERALS LN

City TOTOWA	State NJ	Zip Code 07512
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 2017

Transaction ID : SA11AI.38830

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	265.00
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 157 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. NOWICKI 075, CONRAD J, , MR,
Mailing Address 11 GENERALS LN

City TOTOWA	State NJ	Zip Code 07512
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 455.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2017
Transaction ID : SA11AI.38831

Amount of Each Receipt this Period
155.00

Memo Item

B. OHEARN 930, LEO, , MR,
Mailing Address 3650 KETCH AVE

City OXNARD	State CA	Zip Code 93035
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 31 / 2017
Transaction ID : SA11AI.38896

Amount of Each Receipt this Period
100.00

Memo Item

C. OLIVER 712, EMILY, , MS,
Mailing Address 2230 HIGHWAY 594

City MONROE	State LA	Zip Code 71203
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
11 / 10 / 2017
Transaction ID : SA11AI.38918

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 158 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. OLIVER 712, EMILY, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2230 HIGHWAY 594
 City MONROE State LA Zip Code 71203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2017
Transaction ID : SA11AI.38919
 Amount of Each Receipt this Period 25.00
 Memo Item

B. ORENDUFF 232, LINWOOD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1500 FOREST AVE RM 114
 City RICHMOND State VA Zip Code 23229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ORENDUFF & ASSOCIATES Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 13 / 2017
Transaction ID : SA11AI.38964
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ORESZAK 856, JEANNETTE A, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1515
 City SIERRA VISTA State AZ Zip Code 85636
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 04 / 2017
Transaction ID : SA11AI.38965
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
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 159 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. ORESZAK 856, JEANNETTE A, , MS,
Mailing Address PO BOX 1515

City SIERRA VISTA	State AZ	Zip Code 85636
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00	

Date of Receipt
10 / 10 / 2017
Transaction ID : SA11AI.38966

Amount of Each Receipt this Period
25.00

Memo Item

B. ORESZAK 856, JEANNETTE A, , MS,
Mailing Address PO BOX 1515

City SIERRA VISTA	State AZ	Zip Code 85636
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Date of Receipt
10 / 23 / 2017
Transaction ID : SA11AI.38967

Amount of Each Receipt this Period
50.00

Memo Item

C. ORESZAK 856, JEANNETTE A, , MS,
Mailing Address PO BOX 1515

City SIERRA VISTA	State AZ	Zip Code 85636
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 460.00	

Date of Receipt
11 / 27 / 2017
Transaction ID : SA11AI.38968

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	110.00
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 160 OF 274
	(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

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)
TEA PARTY MAJORITY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OTHOLD 086, CHARLES, , MR,

Mailing Address 159 KNAPP AVE

City HAMILTON	State NJ	Zip Code 08610
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		2017

Transaction ID : SA11AI.39004

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OTHOLD 086, CHARLES, , MR,

Mailing Address 159 KNAPP AVE

City HAMILTON	State NJ	Zip Code 08610
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		01		2017

Transaction ID : SA11AI.39005

Amount of Each Receipt this Period
150.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
OUIMETTE 337, PATRICA, , MRS,

Mailing Address 1812 CHATEAU DR W

City CLEARWATER	State FL	Zip Code 33756
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2017

Transaction ID : SA11AI.39020

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	455.00
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 161 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PALAGANAS 275, MARYJANE, , MS,
 Mailing Address 105 SUSAN CIR

City GOLDSBORO	State NC	Zip Code 27530
-------------------	-------------	-------------------

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

Name of Employer (for Individual) MJP VISIONS REALTY LLC	Occupation (for Individual) MANAGER
---	--

Receipt For:
 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
 11 / 14 / 2017

Transaction ID : SA11AI.39083

Amount of Each Receipt this Period
100.00

Memo Item

B. Panziera 939, Lois R, , MRS,
 Mailing Address 33821 Paraiso Springs Rd

City Soledad	State CA	Zip Code 93960
-----------------	-------------	-------------------

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

Name of Employer (for Individual) PANZIERA MFT CO	Occupation (for Individual) DIRECTOR
--	---

Receipt For:
 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 / 17 / 2017

Transaction ID : SA11AI.39122

Amount of Each Receipt this Period
250.00

Memo Item

C. PAPP 959, MICHAEL P, , MR,
 Mailing Address 1369 EAST AVE

City CHICO	State CA	Zip Code 95926
---------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 10 / 03 / 2017

Transaction ID : SA11AI.39128

Amount of Each Receipt this Period
50.00

Memo Item

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 162 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PARKER 711, JAMES R, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4634 DIXIE BLVD

City SHREVEPORT	State LA	Zip Code 71129
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		24		2017

Transaction ID : SA11AI.39168

Amount of Each Receipt this Period
25.00

Memo Item

B. PASCHALL 801, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13775 WOODLAKE RD

City ELBERT	State CO	Zip Code 80106
----------------	-------------	-------------------

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

Name of Employer (for Individual) MASONITE INT	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 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		04		2017

Transaction ID : SA11AI.39213

Amount of Each Receipt this Period
100.00

Memo Item

C. PASCHALL 801, JAMES, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13775 WOODLAKE RD

City ELBERT	State CO	Zip Code 80106
----------------	-------------	-------------------

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

Name of Employer (for Individual) MASONITE INT	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:
 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
11		03		2017

Transaction ID : SA11AI.39214

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
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 163 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PEHLING 551, STANLEY, , MR,
Mailing Address 6404 134TH ST W

City SAINT PAUL	State MN	Zip Code 55124
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Date of Receipt
MM / DD / YYYY
08 / 23 / 2017
Transaction ID : SA11AI.39297

Amount of Each Receipt this Period
75.00

Memo Item

B. PELTER 483, DUANE J, , MR,
Mailing Address 2135 LONDON BRIDGE DR

City ROCHESTER HILLS	State MI	Zip Code 48307
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
MM / DD / YYYY
08 / 02 / 2017
Transaction ID : SA11AI.39302

Amount of Each Receipt this Period
100.00

Memo Item

C. PETERMAN 191, MICHAEL, , MR,
Mailing Address 8200 HENRY AVE APT C22

City PHILADELPHIA	State PA	Zip Code 19128
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 255.00	

Date of Receipt
MM / DD / YYYY
08 / 09 / 2017
Transaction ID : SA11AI.39375

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	280.00
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 164 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PETERS 505, THERESA M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4225 450TH AVE
 City EMMETSBURG State IA Zip Code 50536
 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 ▼ 250.00

Date of Receipt 11 / 20 / 2017
Transaction ID : SA11AI.39379
 Amount of Each Receipt this Period 50.00
 Memo Item

B. PETERS 805, NANCY M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8582 YELLOWSTONE RD
 City LONGMONT State CO Zip Code 80503
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 08 / 25 / 2017
Transaction ID : SA11AI.39380
 Amount of Each Receipt this Period 75.00
 Memo Item

C. PETKUS 604, DONALD M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12401 ARCHER AVE
 City LEMONT State IL Zip Code 60439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) FUNERAL DIRECTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 02 / 2017
Transaction ID : SA11AI.39415
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 165 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. PETTINI 260, LORETO R, , MR,
 Mailing Address PO BOX 37

City WINDSOR HEIGHTS State WV Zip Code 26075

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

Name of Employer (for Individual) WV PUBLIC DEFENDER Occupation (for Individual) ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 205.00

Date of Receipt
 11 / 08 / 2017
Transaction ID : SA11AI.39432

Amount of Each Receipt this Period
 55.00

Memo Item

B. PHILLIPS 773, BISHOP, , MR,
 Mailing Address 21157 PINETEX ST

City NEW CANEY State TX Zip Code 77357

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 08 / 23 / 2017
Transaction ID : SA11AI.39468

Amount of Each Receipt this Period
 100.00

Memo Item

C. PHILLIPS 773, BISHOP, , MR,
 Mailing Address 21157 PINETEX ST

City NEW CANEY State TX Zip Code 77357

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 11 / 23 / 2017
Transaction ID : SA11AI.39469

Amount of Each Receipt this Period
 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 255.00

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 166 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PINKERTON 456, GLEN, , MR,
Mailing Address 759 ALMA OMEGA RD

City WAVERLY	State OH	Zip Code 45690
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MEAD PAPER CO		Occupation (for Individual) TRUCK DRIVER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00

Date of Receipt
12 / 25 / 2017
Transaction ID : **SA11AI.39513**

Amount of Each Receipt this Period
105.00

Memo Item

B. PITCAIRN 190, BEATRICE S, , MS,
Mailing Address 1620 HUNTINGDON RD

City HUNTINGDON VY	State PA	Zip Code 19006
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
11 / 14 / 2017
Transaction ID : **SA11AI.39520**

Amount of Each Receipt this Period
200.00

Memo Item

C. PITMAN 322, DONALD E, , MR,
Mailing Address 4923 RIVER POINT RD

City JACKSONVILLE	State FL	Zip Code 32207
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 450.00

Date of Receipt
07 / 21 / 2017
Transaction ID : **SA11AI.39522**

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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 167 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PITSCHER 750, ERNEST O, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 416 LONG COVE DR

City FAIRVIEW	State TX	Zip Code 75069
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	11	/	2017

Transaction ID : SA11AI.39525

Amount of Each Receipt this Period
100.00

Memo Item

B. PITSCHER 750, ERNEST O, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 416 LONG COVE DR

City FAIRVIEW	State TX	Zip Code 75069
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12	/	11	/	2017

Transaction ID : SA11AI.39526

Amount of Each Receipt this Period
100.00

Memo Item

C. PLEW 951, BRIAN P, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15270 WINTON WAY

City SAN JOSE	State CA	Zip Code 95124
------------------	-------------	-------------------

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 ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	23	/	2017

Transaction ID : SA11AI.39560

Amount of Each Receipt this Period
100.00

Memo Item

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 168 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. PLOTE 750, LYNN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6409 SAN MARINO DR

City ROWLETT	State TX	Zip Code 75089
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RC DIOCESE OF DALLAS	Occupation (for Individual) ADMINISTRATION
---	---

Receipt For:
 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 / 17 / 2017

Transaction ID : SA11AI.39561

Amount of Each Receipt this Period
 100.00

Memo Item

B. PLOTE 750, LYNN, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6409 SAN MARINO DR

City ROWLETT	State TX	Zip Code 75089
-----------------	-------------	-------------------

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

Name of Employer (for Individual) RC DIOCESE OF DALLAS	Occupation (for Individual) ADMINISTRATION
---	---

Receipt For:
 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
 10 / 16 / 2017

Transaction ID : SA11AI.39562

Amount of Each Receipt this Period
 100.00

Memo Item

C. POHLEN 553, THOMAS E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 975 THOMAS AVE SW

City HUTCHINSON	State MN	Zip Code 55350
--------------------	-------------	-------------------

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

Name of Employer (for Individual) RIDGewater COLLEGE	Occupation (for Individual) PROFESSOR
---	--

Receipt For:
 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
 10 / 19 / 2017

Transaction ID : SA11AI.39577

Amount of Each Receipt this Period
 200.00

Memo Item

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 169 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. POWELL 321, NICKOLAS H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16815 SE 52ND PL
 City OCKLAWAHA State FL Zip Code 32179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 09 / 22 / 2017
Transaction ID : SA11AI.39654
 Amount of Each Receipt this Period 25.00
 Memo Item

B. POWELL 321, NICKOLAS H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16815 SE 52ND PL
 City OCKLAWAHA State FL Zip Code 32179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 09 / 25 / 2017
Transaction ID : SA11AI.39655
 Amount of Each Receipt this Period 25.00
 Memo Item

C. POWELL 321, NICKOLAS H, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16815 SE 52ND PL
 City OCKLAWAHA State FL Zip Code 32179
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 11 / 14 / 2017
Transaction ID : SA11AI.39656
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 170 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. POWELL 321, NICKOLAS H, , MR,
Mailing Address 16815 SE 52ND PL

City OCKLAWAHA	State FL	Zip Code 32179
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

Date of Receipt
12 / 25 / 2017

Transaction ID : SA11AI.39657

Amount of Each Receipt this Period
25.00

Memo Item

B. PULITO 341, DIANA K, , MS,
Mailing Address 15295 CORSINI LN

City NAPLES	State FL	Zip Code 34110
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HEALTH INSTUTUTE		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
10 / 02 / 2017

Transaction ID : SA11AI.39760

Amount of Each Receipt this Period
100.00

Memo Item

C. PURDY 042, MAUREEN, , MRS,
Mailing Address 45 GREAT OAKS LN

City OXFORD	State ME	Zip Code 04270
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 400.00	

Date of Receipt
11 / 06 / 2017

Transaction ID : SA11AI.39775

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	325.00
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 171 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. RADIGAN 208, JAMES T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5508 DORSET AVE

City CHEVY CHASE	State MD	Zip Code 20815
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	21	/	2017

Transaction ID : SA11AI.39830

Amount of Each Receipt this Period
100.00

Memo Item

B. RADTKE 530, MARILYN M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address W176N12452 FOND DU LAC AVE

City GERMANTOWN	State WI	Zip Code 53022
--------------------	-------------	-------------------

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

Name of Employer (for Individual) W@E RADTKE	Occupation (for Individual) OFFICE WORKER
---	--

Receipt For:
 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
11	/	07	/	2017

Transaction ID : SA11AI.39840

Amount of Each Receipt this Period
100.00

Memo Item

C. REA 756, MILLIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12088 PRIVATE ROAD 2901D

City TATUM	State TX	Zip Code 75691
---------------	-------------	-------------------

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

Name of Employer (for Individual) LONGVIEW MED CNTER	Occupation (for Individual) MEDICAL
---	--

Receipt For:
 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
07	/	31	/	2017

Transaction ID : SA11AI.39950

Amount of Each Receipt this Period
100.00

Memo Item

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 172 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. REA 756, MILLIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12088 PRIVATE ROAD 2901D

City TATUM	State TX	Zip Code 75691
---------------	-------------	-------------------

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

Name of Employer (for Individual) LONGVIEW MED CNTER	Occupation (for Individual) MEDICAL
---	--

Receipt For:
 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		31		2017

Transaction ID : SA11AI.39951

Amount of Each Receipt this Period
100.00

Memo Item

B. REA 756, MILLIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12088 PRIVATE ROAD 2901D

City TATUM	State TX	Zip Code 75691
---------------	-------------	-------------------

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

Name of Employer (for Individual) LONGVIEW MED CNTER	Occupation (for Individual) MEDICAL
---	--

Receipt For:
 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
10		16		2017

Transaction ID : SA11AI.39952

Amount of Each Receipt this Period
100.00

Memo Item

C. REA 756, MILLIE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12088 PRIVATE ROAD 2901D

City TATUM	State TX	Zip Code 75691
---------------	-------------	-------------------

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

Name of Employer (for Individual) LONGVIEW MED CNTER	Occupation (for Individual) MEDICAL
---	--

Receipt For:
 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
10		30		2017

Transaction ID : SA11AI.39953

Amount of Each Receipt this Period
100.00

Memo Item

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 173 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. REA 756, MILLIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12088 PRIVATE ROAD 2901D
 City TATUM State TX Zip Code 75691
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LONGVIEW MED CENTER Occupation (for Individual) MEDICAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **12 / 15 / 2017**
Transaction ID : SA11AI.39954
 Amount of Each Receipt this Period 100.00
 Memo Item

B. READ 805, SCOTT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4660 CHAPMAN RD
 City JOHNSTOWN State CO Zip Code 80534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **09 / 08 / 2017**
Transaction ID : SA11AI.39955
 Amount of Each Receipt this Period 200.00
 Memo Item

C. REDDY 062, VIVIAN G, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 223 N SHORE RD
 City DAYVILLE State CT Zip Code 06241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **07 / 21 / 2017**
Transaction ID : SA11AI.39966
 Amount of Each Receipt this Period 100.00
 Memo Item

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 174 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. REED 288, KARL F, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 400 WESLEY DR
APT 368

City ASHEVILLE State NC Zip Code 28803

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 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 / 2017

Transaction ID : SA11AI.39982

Amount of Each Receipt this Period
100.00

Memo Item

B. REGES 078, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 SKYTOP RD

City ANDOVER State NJ Zip Code 07821

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 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 / 18 / 2017

Transaction ID : SA11AI.40017

Amount of Each Receipt this Period
100.00

Memo Item

C. REGES 078, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20 SKYTOP RD

City ANDOVER State NJ Zip Code 07821

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 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
11 / 20 / 2017

Transaction ID : SA11AI.40018

Amount of Each Receipt this Period
100.00

Memo Item

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 175 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. REILLEY 142, MICHAEL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5102 EASTBROOKE PL

City WILLIAMSVILLE	State NY	Zip Code 14221
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		07		2017

Transaction ID : SA11AI.40028

Amount of Each Receipt this Period
200.00

Memo Item

B. REINHARD 180, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 HARVARD AVE

City PALMERTON	State PA	Zip Code 18071
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PENCORSERVICES	Occupation (for Individual) SEMI RETIRED EXEC
---	--

Receipt For:
 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
10		12		2017

Transaction ID : SA11AI.44467

Amount of Each Receipt this Period
500.00

Memo Item

C. REINHARD 180, DONALD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 HARVARD AVE

City PALMERTON	State PA	Zip Code 18071
-------------------	-------------	-------------------

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

Name of Employer (for Individual) PENCORSERVICES	Occupation (for Individual) SEMI RETIRED EXEC
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2017

Transaction ID : SA11AI.44468

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1700.00
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 176 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. REUBEN 625, PHILLIP M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 537 N CAROLINA AVE

City DECATUR	State IL	Zip Code 62522
-----------------	-------------	-------------------

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

Name of Employer (for Individual) STATE OF ILLINOIS	Occupation (for Individual) COMPUTER SYSTEMS ANALYST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2017

Transaction ID : SA11AI.40077

Amount of Each Receipt this Period
40.00

Memo Item

B. REUBEN 625, PHILLIP M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 537 N CAROLINA AVE

City DECATUR	State IL	Zip Code 62522
-----------------	-------------	-------------------

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

Name of Employer (for Individual) STATE OF ILLINOIS	Occupation (for Individual) COMPUTER SYSTEMS ANALYST
--	---

Receipt For:
 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
10	/	12	/	2017

Transaction ID : SA11AI.40078

Amount of Each Receipt this Period
55.00

Memo Item

C. REYNOLDS 276, WILLIAM T, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2905 MARS ST

City RALEIGH	State NC	Zip Code 27604
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	19	/	2017

Transaction ID : SA11AI.40097

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	295.00
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 177 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. RHOADS 750, JOHN, , MR,
Mailing Address PO BOX 963

City ADDISON State TX Zip Code 75001

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

Name of Employer (for Individual) SRI Occupation (for Individual) SELF EMPLOYED

Receipt For:
 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
 10 / 26 / 2017

Transaction ID : SA11AI.40107

Amount of Each Receipt this Period
50.00

Memo Item

B. RHOADS 750, JOHN, , MR,
Mailing Address PO BOX 963

City ADDISON State TX Zip Code 75001

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

Name of Employer (for Individual) SRI Occupation (for Individual) SELF EMPLOYED

Receipt For:
 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
 11 / 14 / 2017

Transaction ID : SA11AI.40108

Amount of Each Receipt this Period
100.00

Memo Item

C. RICE 321, LYNDA, , MS,
Mailing Address 2801 S RIDGEWOOD AVE
UNIT 614

City SOUTH DAYTONA State FL Zip Code 32119

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 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 / 02 / 2017

Transaction ID : SA11AI.40134

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 178 OF 274
<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)
TEA PARTY MAJORITY FUND

A. RIDDLE 264, RICHARD D, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 324 E 7TH ST

City WESTON	State WV	Zip Code 26452
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2017

Transaction ID : SA11AI.40177

Amount of Each Receipt this Period
250.00

Memo Item

B. RINGO 986, JEANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11306 SE 19TH ST

City VANCOUVER	State WA	Zip Code 98664
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	24	/	2017

Transaction ID : SA11AI.40209

Amount of Each Receipt this Period
100.00

Memo Item

C. ROBERSON 726, ROBERT, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address HC 73 BOX 250

City MARBLE FALLS	State AR	Zip Code 72648
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10	/	25	/	2017

Transaction ID : SA11AI.40258

Amount of Each Receipt this Period
20.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	370.00
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 179 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. RODACK 331, MARK, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16051 COLLINS AVE
 APT #3502
 City SUNNY ISLES BEACH State FL Zip Code 33160
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 12 / 2017**
Transaction ID : SA11AI.44474
 Amount of Each Receipt this Period 250.00
 Memo Item

B. ROGERS 365, JOAN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 SPANISH FORT BLVD
 APT 55
 City SPANISH FORT State AL Zip Code 36527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt **08 / 03 / 2017**
Transaction ID : SA11AI.40371
 Amount of Each Receipt this Period 175.00
 Memo Item

C. ROGERS 365, JOAN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 SPANISH FORT BLVD
 APT 55
 City SPANISH FORT State AL Zip Code 36527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **11 / 03 / 2017**
Transaction ID : SA11AI.40373
 Amount of Each Receipt this Period 175.00
 Memo Item

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: PAGE 180 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. ROGERS 365, JOAN H, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 CRESTVIEW CIR
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 25 / 2017
Transaction ID : SA11AI.40372
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROGERS 365, JOAN H, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 109 CRESTVIEW CIR
 City DAPHNE State AL Zip Code 36526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 25 / 2017
Transaction ID : SA11AI.40374
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROQUEMORE 756, MICHAEL B, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 COUNTY ROAD 3082
 City DE BERRY State TX Zip Code 75639
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 11 / 17 / 2017
Transaction ID : SA11AI.40437
 Amount of Each Receipt this Period 105.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
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 181 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. ROSA 601, KATHLEEN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 BLUEGRASS CT
 City SAINT CHARLES State IL Zip Code 60174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 11 / 2017**
Transaction ID : SA11AI.40441
 Amount of Each Receipt this Period 100.00
 Memo Item

B. ROSA 601, KATHLEEN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1914 BLUEGRASS CT
 City SAINT CHARLES State IL Zip Code 60174
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **11 / 13 / 2017**
Transaction ID : SA11AI.40442
 Amount of Each Receipt this Period 100.00
 Memo Item

C. ROSSER 354, CHARLES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20976 WALNUT LN
 City VANCE State AL Zip Code 35490
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt **12 / 08 / 2017**
Transaction ID : SA11AI.40487
 Amount of Each Receipt this Period 10.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	210.00
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 182 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. ROSSING 535, DAVID, , MR,
Mailing Address PO BOX 267

City ARGYLE	State WI	Zip Code 53504
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.00

Date of Receipt
MM / DD / YYYY
11 / 15 / 2017

Transaction ID : SA11AI.40490

Amount of Each Receipt this Period
35.00

Memo Item

B. ROWE 270, DAVID L, , MR,
Mailing Address 639 OLD US 52 S

City MOUNT AIRY	State NC	Zip Code 27030
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HIGHWAY CONTRACTOR		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
07 / 26 / 2017

Transaction ID : SA11AI.40525

Amount of Each Receipt this Period
200.00

Memo Item

C. ROWE 270, DAVID L, , MR,
Mailing Address 639 OLD US 52 S

City MOUNT AIRY	State NC	Zip Code 27030
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) HIGHWAY CONTRACTOR		Occupation (for Individual) SELF EMPLOYED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2017

Transaction ID : SA11AI.40526

Amount of Each Receipt this Period
300.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	535.00
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 183 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. ROWLAND 638, ALLEN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18880 STATE HIGHWAY D

City DEXTER	State MO	Zip Code 63841
----------------	-------------	-------------------

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

Name of Employer (for Individual) MISSOURI FARM BUREAU	Occupation (for Individual) BOARD MEMBER
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2017

Transaction ID : SA11AI.40533

Amount of Each Receipt this Period
105.00

Memo Item

B. ROWLES 230, RHONDA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 RIDDLES BRIDGE RD

City GOOCHLAND	State VA	Zip Code 23063
-------------------	-------------	-------------------

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

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

Receipt For:
 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		2017

Transaction ID : SA11AI.40534

Amount of Each Receipt this Period
100.00

Memo Item

C. ROWLES 230, RHONDA, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4101 RIDDLES BRIDGE RD

City GOOCHLAND	State VA	Zip Code 23063
-------------------	-------------	-------------------

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

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

Receipt For:
 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
12		21		2017

Transaction ID : SA11AI.40535

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 184 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		2017

Transaction ID : SA11AI.40541

Amount of Each Receipt this Period
100.00

Memo Item

B. ROY 985, ANN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 211 E PENZANCE RD

City SHELTON	State WA	Zip Code 98584
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		19		2017

Transaction ID : SA11AI.40542

Amount of Each Receipt this Period
100.00

Memo Item

C. RUFFALO 923, MARCY E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 13034 SOUTH LN

City REDLANDS	State CA	Zip Code 92373
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		13		2017

Transaction ID : SA11AI.40574

Amount of Each Receipt this Period
50.00

Memo Item

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 185 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. RUNYEN 624, DEWANE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3801 E HONEY LN

City OLNEY	State IL	Zip Code 62450
---------------	-------------	-------------------

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

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

Receipt For:
 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
11		10		2017

Transaction ID : SA11AI.40587

Amount of Each Receipt this Period
205.00

Memo Item

B. RUSH 884, JUDY, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2675 QUAY ROAD 40

City MCALISTER	State NM	Zip Code 88427
-------------------	-------------	-------------------

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

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

Receipt For:
 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
11		30		2017

Transaction ID : SA11AI.40595

Amount of Each Receipt this Period
100.00

Memo Item

C. SAHLIYEH 752, SANDY, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11 PARLIAMENT PL

City DALLAS	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		25		2017

Transaction ID : SA11AI.40650

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	555.00
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 186 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SAHLIYEH 752, SANDY, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11 PARLIAMENT PL
 City DALLAS State TX Zip Code 75225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 24 / 2017
Transaction ID : SA11AI.40651
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SANSOM 325, JOHN M, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9455 PENSACOLA BLVD STE B
 City PENSACOLA State FL Zip Code 32534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ACCOUNTANT Occupation (for Individual) CUSTOMER SERVICE REPRESENTATIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 08 / 2017
Transaction ID : SA11AI.40701
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. SAPP 680, WILLIAM, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 102 NOBLE DR
 City ASHLAND State NE Zip Code 68003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SAPP PROS Occupation (for Individual) SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 08 / 2017
Transaction ID : SA11AI.40710
 Amount of Each Receipt this Period 100.00
 Memo Item

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 187 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SCARDELLO 935, JAYNE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20864 OLD TOWN RD

City TEHACHAPI	State CA	Zip Code 93561
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		07		2017

Transaction ID : SA11AI.40752

Amount of Each Receipt this Period
25.00

Memo Item

B. SCARDELLO 935, JAYNE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 20864 OLD TOWN RD

City TEHACHAPI	State CA	Zip Code 93561
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		07		2017

Transaction ID : SA11AI.40753

Amount of Each Receipt this Period
25.00

Memo Item

C. SCARPACI 112, LENA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 86TH ST

City BROOKLYN	State NY	Zip Code 11228
------------------	-------------	-------------------

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

Name of Employer (for Individual) SCAPACI FUNERAL HOME	Occupation (for Individual) CUSTOMER SERVICE
---	---

Receipt For:
 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		2017

Transaction ID : SA11AI.40754

Amount of Each Receipt this Period
100.00

Memo Item

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:	PAGE 188 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. SCARPACI 112, LENA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1401 86TH ST

City BROOKLYN	State NY	Zip Code 11228
------------------	-------------	-------------------

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

Name of Employer (for Individual) SCAPACI FUNERAL HOME	Occupation (for Individual) CUSTOMER SERVICE
---	---

Receipt For:
 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
12	/	22	/	2017

Transaction ID : SA11AI.40755

Amount of Each Receipt this Period
100.00

Memo Item

B. SCHAFFER 553, JULIE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 2ND ST W

City HECTOR	State MN	Zip Code 55342
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	25	/	2017

Transaction ID : SA11AI.40781

Amount of Each Receipt this Period
50.00

Memo Item

C. SCHARF 220, PATRICIA L, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3713 S GEORGE MASON DR
APT 505W

City FALLS CHURCH	State VA	Zip Code 22041
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	04	/	2017

Transaction ID : SA11AI.40798

Amount of Each Receipt this Period
250.00

Memo Item

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 189 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SCHARF 220, PATRICIA L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3713 S GEORGE MASON DR
 APT 505W
 City FALLS CHURCH State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 03 / 2017
Transaction ID : SA11AI.40799
 Amount of Each Receipt this Period 250.00
 Memo Item

B. SCHARF 220, PATRICIA L, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3713 S GEORGE MASON DR
 APT 505W
 City FALLS CHURCH State VA Zip Code 22041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 625.00

Date of Receipt 11 / 27 / 2017
Transaction ID : SA11AI.40800
 Amount of Each Receipt this Period 25.00
 Memo Item

C. SCHELLING 125, EDWARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1217 BURLINGHAM RD
 City PINE BUSH State NY Zip Code 12566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 10 / 2017
Transaction ID : SA11AI.40812
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	525.00
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 190 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. SCHLUETER 018, GERALD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 26 BEACON ST
APT 10E

City BURLINGTON	State MA	Zip Code 01803
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		03		2017

Transaction ID : SA11AI.40837

Amount of Each Receipt this Period
50.00

Memo Item

B. SCHNEIDER 613, BEVERLY K, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1016 PHEASANT RIDGE LN

City PRINCETON	State IL	Zip Code 61356
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		12		2017

Transaction ID : SA11AI.40866

Amount of Each Receipt this Period
250.00

Memo Item

C. SCHORR 630, MARY R, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4991 COUNTRY CLUB DR

City HIGH RIDGE	State MO	Zip Code 63049
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		07		2017

Transaction ID : SA11AI.40897

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	405.00
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 191 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SCHORR 630, MARY R, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4991 COUNTRY CLUB DR

City HIGH RIDGE	State MO	Zip Code 63049
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	22	/	2017

Transaction ID : SA11AI.40898

Amount of Each Receipt this Period
100.00

Memo Item

B. SCHROEDL 606, ELIZABETH, , MRS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5043 W GRACE ST

City CHICAGO	State IL	Zip Code 60641
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	2017

Transaction ID : SA11AI.40915

Amount of Each Receipt this Period
100.00

Memo Item

C. SCHWENKER 770, CARL, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1927 CORRAL DR

City HOUSTON	State TX	Zip Code 77090
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	07	/	2017

Transaction ID : SA11AI.40968

Amount of Each Receipt this Period
200.00

Memo Item

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 192 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SCIROCCO 070, DIANE F, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1530 PALISADE AVE
 APT 23J
 City FORT LEE State NJ Zip Code 07024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 11 / 22 / 2017
Transaction ID : SA11AI.40973
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. SCOTT 777, JOHN W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2020 EDSON DR
 City BEAUMONT State TX Zip Code 77706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 26 / 2017
Transaction ID : SA11AI.40994
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. SHARRATT 330, LAURA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4730 FILLMORE ST
 City HOLLYWOOD State FL Zip Code 33021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 08 / 2017
Transaction ID : SA11AI.41139
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1250.00
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 193 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SHARRATT 330, LAURA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4730 FILLMORE ST
 City HOLLYWOOD State FL Zip Code 33021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 18 / 2017
Transaction ID : SA11AI.41140
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SHARRATT 330, LAURA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4730 FILLMORE ST
 City HOLLYWOOD State FL Zip Code 33021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 11 / 02 / 2017
Transaction ID : SA11AI.41141
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. SHARRATT 330, LAURA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4730 FILLMORE ST
 City HOLLYWOOD State FL Zip Code 33021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2200.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 18 / 2017
Transaction ID : SA11AI.41142
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SHAW 024, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 LANGDON ST
 City NEWTON State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 02 / 2017
Transaction ID : SA11AI.41152
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. SHAW 024, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 126 LANGDON ST
 City NEWTON State MA Zip Code 02458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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
 11 / 07 / 2017
Transaction ID : SA11AI.41153
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. SHEARER 773, JACK, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13519 SUMMER HILL DR
 City MONTGOMERY State TX Zip Code 77356
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INTEGRA INVESTMENTS LLC Occupation (for Individual) MANAGER
 Receipt For: 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
 11 / 22 / 2017
Transaction ID : SA11AI.41169
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 195 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SHEPHERD 594, MARIAN, , MS,
Mailing Address PO BOX 81

City WINIFRED	State MT	Zip Code 59489
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
09 / 08 / 2017
Transaction ID : SA11AI.41207

Amount of Each Receipt this Period
25.00

Memo Item

B. SHIREMAN 028, JOHN, , MR,
Mailing Address 5 CHARITY DR

City WARREN	State RI	Zip Code 02885
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) REFUSED		Occupation (for Individual) REFUSED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
07 / 10 / 2017
Transaction ID : SA11AI.41239

Amount of Each Receipt this Period
100.00

Memo Item

C. SHIREMAN 028, JOHN, , MR,
Mailing Address 5 CHARITY DR

City WARREN	State RI	Zip Code 02885
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) REFUSED		Occupation (for Individual) REFUSED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
10 / 09 / 2017
Transaction ID : SA11AI.41240

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 196 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SHORE 280, BRENDA, , MS,
Mailing Address 305 LARRY DR

City KANNAPOLIS	State NC	Zip Code 28083
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Date of Receipt
07 / 07 / 2017
Transaction ID : SA11AI.41246

Amount of Each Receipt this Period
50.00

Memo Item

B. SIGMON 220, JOHN, , MR,
Mailing Address 3368 TALEEN CT

City ANNANDALE	State VA	Zip Code 22003
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Date of Receipt
11 / 22 / 2017
Transaction ID : SA11AI.41298

Amount of Each Receipt this Period
55.00

Memo Item

C. SIMMONS 284, ANDREW, , MR,
Mailing Address 25245 NC HIGHWAY 53 E

City KELLY	State NC	Zip Code 28448
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 300.00	

Date of Receipt
08 / 04 / 2017
Transaction ID : SA11AI.41328

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 197 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SIMMONS 351, ROGER, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6005 COUNTY HIGHWAY 27

City SPRINGVILLE	State AL	Zip Code 35146
---------------------	-------------	-------------------

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

Name of Employer (for Individual) ESTES EQUIPMENT	Occupation (for Individual) MANAGER
--	--

Receipt For:
 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		01		2017

Transaction ID : SA11AI.41329

Amount of Each Receipt this Period
100.00

Memo Item

B. SIMONSON 554, GERALD W, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5813 JEFF PL

City MINNEAPOLIS	State MN	Zip Code 55436
---------------------	-------------	-------------------

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

Name of Employer (for Individual) OMNETICS CONNECTOR CORP	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 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
10		09		2017

Transaction ID : SA11AI.41347

Amount of Each Receipt this Period
100.00

Memo Item

C. SKROBOLA 105, MICHAEL G, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 HUSTED AVE

City PEEKSKILL	State NY	Zip Code 10566
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		12		2017

Transaction ID : SA11AI.41392

Amount of Each Receipt this Period
100.00

Memo Item

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 198 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. SKROBOLA 105, MICHAEL G, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 111 HUSTED AVE

City PEEKSKILL	State NY	Zip Code 10566
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		12		2017

Transaction ID : SA11AI.41393

Amount of Each Receipt this Period
100.00

Memo Item

B. SLESSOR 506, VERNON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1176 160TH ST

City PLAINFIELD	State IA	Zip Code 50666
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		07		2017

Transaction ID : SA11AI.41415

Amount of Each Receipt this Period
100.00

Memo Item

C. SMEED 933, CLAIRE J, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3200 21ST ST STE 401

City BAKERSFIELD	State CA	Zip Code 93301
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
955.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		18		2017

Transaction ID : SA11AI.41434

Amount of Each Receipt this Period
200.00

Memo Item

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:	PAGE 199 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. SMICKLAS 730, JOHN, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1913 TRAILVIEW DR

City NORMAN	State OK	Zip Code 73072
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		21		2017

Transaction ID : SA11AI.41438

Amount of Each Receipt this Period
200.00

Memo Item

B. SMITH 215, LARRY, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 107 S 7TH ST

City OAKLAND	State MD	Zip Code 21550
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		31		2017

Transaction ID : SA11AI.41471

Amount of Each Receipt this Period
100.00

Memo Item

C. SMITH 363, BONNIE B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6 CHATEAU PL

City DOTHAN	State AL	Zip Code 36303
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		10		2017

Transaction ID : SA11AI.41483

Amount of Each Receipt this Period
100.00

Memo Item

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 200 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SMITH 363, BONNIE B, , MS,
Mailing Address 6 CHATEAU PL

City DOTHAN	State AL	Zip Code 36303
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 09 / 2017
Transaction ID : SA11AI.41484

Amount of Each Receipt this Period
100.00

Memo Item

B. SMITH 378, JAMES, , MR,
Mailing Address 3184 ROY MESSER HWY

City WHITE PINE	State TN	Zip Code 37890
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2017
Transaction ID : SA11AI.41489

Amount of Each Receipt this Period
100.00

Memo Item

C. SMITH 532, BARBARA, , MS,
Mailing Address 3222 E HAMPSHIRE AVE

City MILWAUKEE	State WI	Zip Code 53211
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 800.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 17 / 2017
Transaction ID : SA11AI.41521

Amount of Each Receipt this Period
100.00

Memo Item

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 201 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SMITH 532, BARBARA, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3222 E HAMPSHIRE AVE
 City MILWAUKEE State WI Zip Code 53211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

Date of Receipt **07 / 31 / 2017**
Transaction ID : SA11AI.41522
 Amount of Each Receipt this Period 500.00
 Memo Item

B. SMITH 984, EDWARD J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8412 20TH ST W
 City UNIVERSITY PLACE State WA Zip Code 98466
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **08 / 02 / 2017**
Transaction ID : SA11AI.41559
 Amount of Each Receipt this Period 200.00
 Memo Item

C. SOMMER 774, DOUGLAS, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3411 POWELL WAY
 City MISSOURI CITY State TX Zip Code 77459
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) KB HOMES Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **11 / 24 / 2017**
Transaction ID : SA11AI.41619
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00
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 202 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. SOMMER 774, DOUGLAS, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3411 POWELL WAY

City MISSOURI CITY	State TX	Zip Code 77459
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) KB HOMES	Occupation (for Individual) MANAGER
---	--

Receipt For:
 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
12	/	14	/	2017

Transaction ID : SA11AI.41620

Amount of Each Receipt this Period
75.00

Memo Item

B. SONDHEIMER 801, DAVID H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 HIWALL CT

City CASTLE ROCK	State CO	Zip Code 80109
---------------------	-------------	-------------------

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

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

Receipt For:
 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	/	2017

Transaction ID : SA11AI.41621

Amount of Each Receipt this Period
100.00

Memo Item

C. SONDHEIMER 801, DAVID H, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2810 HIWALL CT

City CASTLE ROCK	State CO	Zip Code 80109
---------------------	-------------	-------------------

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

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

Receipt For:
 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
12	/	29	/	2017

Transaction ID : SA11AI.41622

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	275.00
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 203 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. SPARKS 775, RICHARD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 202

City WALLISVILLE	State TX	Zip Code 77597
---------------------	-------------	-------------------

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

Name of Employer (for Individual) WALLISVILLE ELECTRIC INC	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 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
11	/	20	/	2017

Transaction ID : SA11AI.41642

Amount of Each Receipt this Period
150.00

Memo Item

B. STABEN 986, ROGER A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27305 NE 83RD CT

City BATTLE GROUND	State WA	Zip Code 98604
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	08	/	2017

Transaction ID : SA11AI.41709

Amount of Each Receipt this Period
100.00

Memo Item

C. STABEN 986, ROGER A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27305 NE 83RD CT

City BATTLE GROUND	State WA	Zip Code 98604
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	22	/	2017

Transaction ID : SA11AI.41710

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	355.00
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 204 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. STAGGS 780, FRANK, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2620 MUSSER ST

City LAREDO	State TX	Zip Code 78043
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11	/	29	/	2017

Transaction ID : SA11AI.41726

Amount of Each Receipt this Period
100.00

Memo Item

B. STEARNS 922, GISELA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 270 GOLD CANYON DR

City PALM DESERT	State CA	Zip Code 92211
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
08	/	02	/	2017

Transaction ID : SA11AI.41792

Amount of Each Receipt this Period
105.00

Memo Item

C. STEELE 802, CLARENCE BRAD, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4623 S ZENOBIA ST

City DENVER	State CO	Zip Code 80236
----------------	-------------	-------------------

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

Name of Employer (for Individual) BRAD STEELE & ASSOCIATES	Occupation (for Individual) PRINCIPAL
---	--

Receipt For:
 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	/	19	/	2017

Transaction ID : SA11AI.41801

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 205 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. STEELE 802, CLARENCE BRAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4623 S ZENOBIA ST
 City DENVER State CO Zip Code 80236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BRAD STEELE & ASSOCIATES Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 07 / 2017
Transaction ID : SA11AI.41802
 Amount of Each Receipt this Period 100.00
 Memo Item

B. STEGER 244, DONALD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 2875
 City STAUNTON State VA Zip Code 24402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 15 / 2017
Transaction ID : SA11AI.41817
 Amount of Each Receipt this Period 250.00
 Memo Item

C. STEVENS 798, JAMES, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 608
 City TERLINGUA State TX Zip Code 79852
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 06 / 2017
Transaction ID : SA11AI.41879
 Amount of Each Receipt this Period 200.00
 Memo Item

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:	PAGE 206 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. STOBBE 495, JOANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2472 BLANCHARD ST SW

City WYOMING	State MI	Zip Code 49519
-----------------	-------------	-------------------

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

Name of Employer (for Individual) TRANSNATION TITLE AGENCY	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 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		30		2017

Transaction ID : SA11AI.41947

Amount of Each Receipt this Period
250.00

Memo Item

B. STOBBE 495, JOANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2472 BLANCHARD ST SW

City WYOMING	State MI	Zip Code 49519
-----------------	-------------	-------------------

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

Name of Employer (for Individual) TRANSNATION TITLE AGENCY	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

Transaction ID : SA11AI.41948

Amount of Each Receipt this Period
100.00

Memo Item

C. STOBBE 495, JOANNE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2472 BLANCHARD ST SW

City WYOMING	State MI	Zip Code 49519
-----------------	-------------	-------------------

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

Name of Employer (for Individual) TRANSNATION TITLE AGENCY	Occupation (for Individual) ACCOUNTANT
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		30		2017

Transaction ID : SA11AI.41949

Amount of Each Receipt this Period
250.00

Memo Item

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 207 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. STOKES 292, DALTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1504 WHEELER RD

City COLUMBIA	State SC	Zip Code 29204
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		05		2017

Transaction ID : SA11AI.41960

Amount of Each Receipt this Period
255.00

Memo Item

B. STOKES 292, DALTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1504 WHEELER RD

City COLUMBIA	State SC	Zip Code 29204
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		20		2017

Transaction ID : SA11AI.41961

Amount of Each Receipt this Period
150.00

Memo Item

C. STONE 881, DAVID L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 888

City PORTALES	State NM	Zip Code 88130
------------------	-------------	-------------------

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

Name of Employer (for Individual) JP STONE COMUNITY BANK	Occupation (for Individual) BANK MANAGER
---	---

Receipt For:
 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
07		19		2017

Transaction ID : SA11AI.41973

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	505.00
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 208 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. STONE 881, DAVID L, , MR,
Mailing Address PO BOX 888

City PORTALES	State NM	Zip Code 88130
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JP STONE COMUNITY BANK		Occupation (for Individual) BANK MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00

Date of Receipt
09 / 01 / 2017
Transaction ID : SA11AI.41974

Amount of Each Receipt this Period
250.00

Memo Item

B. STONE 881, DAVID L, , MR,
Mailing Address PO BOX 888

City PORTALES	State NM	Zip Code 88130
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) JP STONE COMUNITY BANK		Occupation (for Individual) BANK MANAGER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 950.00

Date of Receipt
12 / 20 / 2017
Transaction ID : SA11AI.41975

Amount of Each Receipt this Period
250.00

Memo Item

C. STRAKA 557, PAUL, , MR,
Mailing Address 3124 COUNTY ROAD 904

City BABBITT	State MN	Zip Code 55706
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) ARDENT MUSIC LLC		Occupation (for Individual) EXECUTIVE
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 220.00

Date of Receipt
10 / 23 / 2017
Transaction ID : SA11AI.42004

Amount of Each Receipt this Period
40.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	540.00
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 209 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. STUBBLEFIELD 654, ANDREW L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 75 EVANS RD

City CUBA	State MO	Zip Code 65453
--------------	-------------	-------------------

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

Name of Employer (for Individual) CARE NETWORK HEALTH PROVIDERS	Occupation (for Individual) SELF EMPLOYED
--	--

Receipt For:
 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
10		02		2017

Transaction ID : SA11AI.42047

Amount of Each Receipt this Period
100.00

Memo Item

B. STUDEMAN 490, KENNETH J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 65523 N CENTERVILLE RD

City STURGIS	State MI	Zip Code 49091
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		12		2017

Transaction ID : SA11AI.42060

Amount of Each Receipt this Period
300.00

Memo Item

C. STUECKLE 980, CLAYTON, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 341 RAILROAD AVE S

City KENT	State WA	Zip Code 98032
--------------	-------------	-------------------

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

Name of Employer (for Individual) SUPERIOR MANUFACTURING	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:
 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		11		2017

Transaction ID : SA11AI.42061

Amount of Each Receipt this Period
200.00

Memo Item

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:	PAGE 210 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. STUECKLE 980, CLAYTON, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 341 RAILROAD AVE S
 City KENT State WA Zip Code 98032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SUPERIOR MANUFACTURING Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 11 / 13 / 2017
Transaction ID : SA11AI.42062
 Amount of Each Receipt this Period 200.00
 Memo Item

B. STUMP 525, ROBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2713 DOUDS RD
 City LIBERTYVILLE State IA Zip Code 52567
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.42066
 Amount of Each Receipt this Period 300.00
 Memo Item

C. SUSONG 305, BEBEE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 366 HOLLY CIR
 City DAWSONVILLE State GA Zip Code 30534
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 07 / 24 / 2017
Transaction ID : SA11AI.42117
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	525.00
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 211 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. SUSONG 305, BEBEE, , MS,
 Mailing Address 366 HOLLY CIR

City DAWSONVILLE	State GA	Zip Code 30534
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 18 / 2017

Transaction ID : SA11AI.42118

Amount of Each Receipt this Period
105.00

Memo Item

B. SUSONG 305, BEBEE, , MS,
 Mailing Address 366 HOLLY CIR

City DAWSONVILLE	State GA	Zip Code 30534
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 15 / 2017

Transaction ID : SA11AI.42119

Amount of Each Receipt this Period
105.00

Memo Item

C. SWAGGART 978, NANCY, , MS,
 Mailing Address PO BOX 250

City HERMISTON	State OR	Zip Code 97838
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 28 / 2017

Transaction ID : SA11AI.42129

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	460.00
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 212 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. TAYLOR 974, ROD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 2127

City BANDON	State OR	Zip Code 97411
----------------	-------------	-------------------

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

Name of Employer (for Individual) US SURVEY SUPPLY	Occupation (for Individual) FOUNDER
---	--

Receipt For:
 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
10		23		2017

Transaction ID : SA11AI.42276

Amount of Each Receipt this Period
50.00

Memo Item

B. TEAGUE 765, CHERI, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8177 S FM 908

City ROCKDALE	State TX	Zip Code 76567
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		20		2017

Transaction ID : SA11AI.42286

Amount of Each Receipt this Period
100.00

Memo Item

C. TERRY 871, SUSAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4725 SAN PEDRO DR NE
UNIT 16

City ALBUQUERQUE	State NM	Zip Code 87109
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		28		2017

Transaction ID : SA11AI.42322

Amount of Each Receipt this Period
50.00

Memo Item

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 213 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. TERSTRIEP 662, JOAN, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 19208 W 98TH TER

City LENEXA	State KS	Zip Code 66220
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	15	/	2017

Transaction ID : SA11AI.42325

Amount of Each Receipt this Period
50.00

Memo Item

B. THOMPSON 545, LINDA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2248 W MIRROR LAKE RD

City PARK FALLS	State WI	Zip Code 54552
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
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Receipt For:
 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
12	/	07	/	2017

Transaction ID : SA11AI.42413

Amount of Each Receipt this Period
105.00

Memo Item

C. THOMPSON 704, ROBERT Y, , MR, III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 206 HICKORY ST

City AMITE	State LA	Zip Code 70422
---------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	07	/	2017

Transaction ID : SA11AI.42414

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	255.00
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 214 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. THOMPSON 704, ROBERT Y, , MR, III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 HICKORY ST
 City AMITE State LA Zip Code 70422
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt **11 / 07 / 2017**
Transaction ID : SA11AI.42415
 Amount of Each Receipt this Period 100.00
 Memo Item

B. TIERNEY 117, JOAN M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 386 MCKINLEY TER
 City CENTERPORT State NY Zip Code 11721
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 05 / 2017**
Transaction ID : SA11AI.42470
 Amount of Each Receipt this Period 50.00
 Memo Item

C. TOLLIVER 637, ROGER, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 590 WINDWOOD LAKE DR
 City CPE GIRARDEAU State MO Zip Code 63701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **11 / 01 / 2017**
Transaction ID : SA11AI.42502
 Amount of Each Receipt this Period 100.00
 Memo Item

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: PAGE 215 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. TOPAR 043, RAYMOND R, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 410 LAKEVIEW DR
 City SOUTH CHINA State ME Zip Code 04358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 15 / 2017
Transaction ID : SA11AI.42526
 Amount of Each Receipt this Period 25.00
 Memo Item

B. TRAWICK 290, ARCHIE W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 JAKES LANDING RD STE 2
 City LEXINGTON State SC Zip Code 29072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JINKS LANDING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt 09 / 20 / 2017
Transaction ID : SA11AI.42567
 Amount of Each Receipt this Period 500.00
 Memo Item

C. TRAWICK 290, ARCHIE W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 220 JAKES LANDING RD STE 2
 City LEXINGTON State SC Zip Code 29072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) JINKS LANDING Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1150.00

Date of Receipt 11 / 16 / 2017
Transaction ID : SA11AI.42568
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 625.00
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 216 OF 274
	(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)
TEA PARTY MAJORITY FUND

A. TREDINICK 322, SUE B, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9250 BAYMEADOWS RD
STE 400

City JACKSONVILLE State FL Zip Code 32256

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

Name of Employer (for Individual) ST JOHNS TRADING CO Occupation (for Individual) PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 08 / 2017
Transaction ID : SA11AI.42579

Amount of Each Receipt this Period
250.00

Memo Item

B. TSCHUDY 631, JANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COUNTRY ESTATES PL

City SAINT LOUIS State MO Zip Code 63131

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

Name of Employer (for Individual) NONE Occupation (for Individual) Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
07 / 12 / 2017
Transaction ID : SA11AI.42641

Amount of Each Receipt this Period
150.00

Memo Item

C. TSCHUDY 631, JANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COUNTRY ESTATES PL

City SAINT LOUIS State MO Zip Code 63131

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

Name of Employer (for Individual) NONE Occupation (for Individual) Homemaker

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
450.00

Date of Receipt
08 / 10 / 2017
Transaction ID : SA11AI.42642

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. TSCHUDY 631, JANE, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9 COUNTRY ESTATES PL

City SAINT LOUIS	State MO	Zip Code 63131
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) Homemaker
---	--

Receipt For:
 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
11	/	22	/	2017

Transaction ID : SA11AI.42643

Amount of Each Receipt this Period
200.00

Memo Item

B. TURNER 752, JOHN, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4500 LORRAINE AVE

City DALLAS	State TX	Zip Code 75205
----------------	-------------	-------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2017

Transaction ID : SA11AI.44529

Amount of Each Receipt this Period
500.00

Memo Item

C. TUROWSKI 601, DANIEL M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 924 N PRATER AVE

City MELROSE PARK	State IL	Zip Code 60164
----------------------	-------------	-------------------

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

Name of Employer (for Individual) MACHIN	Occupation (for Individual) CUSTOMER SERVICE REP
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
905.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2017

Transaction ID : SA11AI.42700

Amount of Each Receipt this Period
305.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1005.00
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 218 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. TUROWSKI 601, DANIEL M, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 924 N PRATER AVE

City MELROSE PARK	State IL	Zip Code 60164
----------------------	-------------	-------------------

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

Name of Employer (for Individual) MACHIN	Occupation (for Individual) CUSTOMER SERVICE REP
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1215.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2017

Transaction ID : SA11AI.42701

Amount of Each Receipt this Period
310.00

Memo Item

B. UMPHLETT 234, WILLIAM J, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 597

City WINDSOR	State VA	Zip Code 23487
-----------------	-------------	-------------------

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

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

Receipt For:
 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
10		06		2017

Transaction ID : SA11AI.42735

Amount of Each Receipt this Period
250.00

Memo Item

C. VAN BURKLEO 785, DORINDA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1400 W IRIS AVE

City MCALLEN	State TX	Zip Code 78501
-----------------	-------------	-------------------

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

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

Receipt For:
 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
12		20		2017

Transaction ID : SA11AI.42785

Amount of Each Receipt this Period
55.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	615.00
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 219 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. VANCE 317, REBECCA, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 39 EAGLE DR

City TIFTON	State GA	Zip Code 31793
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
455.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2017

Transaction ID : SA11AI.42803

Amount of Each Receipt this Period
105.00

Memo Item

B. VANHOOK 600, CHARLOTTE E, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 292 HANLON RD

City LIBERTYVILLE	State IL	Zip Code 60048
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	03	/	2017

Transaction ID : SA11AI.42825

Amount of Each Receipt this Period
100.00

Memo Item

C. VANHORN 206, BRUCE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2432 PINEFIELD RD

City WALDORF	State MD	Zip Code 20601
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
405.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	06	/	2017

Transaction ID : SA11AI.42828

Amount of Each Receipt this Period
155.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	360.00
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 220 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. VANNOY 085, ELEANOR M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 HOPEWELL PENNINGTON RD

City HOPEWELL	State NJ	Zip Code 08525
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		12		2017

Transaction ID : SA11AI.42833

Amount of Each Receipt this Period
55.00

Memo Item

B. VANNOY 085, ELEANOR M, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 HOPEWELL PENNINGTON RD

City HOPEWELL	State NJ	Zip Code 08525
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2017

Transaction ID : SA11AI.42834

Amount of Each Receipt this Period
25.00

Memo Item

C. VEACH 267, HERBERT A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address RR 1
BOX 11AA

City AUGUSTA	State WV	Zip Code 26704
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		25		2017

Transaction ID : SA11AI.42861

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	330.00
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 221 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. VESPO 463, JERRY, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5165 OSAGE AVE

City PORTAGE	State IN	Zip Code 46368
-----------------	-------------	-------------------

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

Name of Employer (for Individual) MLMK USA	Occupation (for Individual) ELECTICAL TECHNICIAN
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2017

Transaction ID : SA11AI.42890

Amount of Each Receipt this Period
 35.00

Memo Item

B. VESTER 721, RAY E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 SMITH VESTER RD

City STUTT GART	State AR	Zip Code 72160
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 11 / 23 / 2017

Transaction ID : SA11AI.42896

Amount of Each Receipt this Period
 100.00

Memo Item

C. VOGT 671, MILDRED R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 IVY DR
 APT 105

City NORTH NEWTON	State KS	Zip Code 67117
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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 / 11 / 2017

Transaction ID : SA11AI.42947

Amount of Each Receipt this Period
 50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
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 222 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. VOGT 671, MILDRED R, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3001 IVY DR
 APT 105
 City NORTH NEWTON State KS Zip Code 67117
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 305.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2017
Transaction ID : SA11AI.42948
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. VRABEL 444, MYRON, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14101 COUNTRY VIEW CIR
 City COLUMBIANA State OH Zip Code 44408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RUFUSED Occupation (for Individual) TECHNICIAN
 Receipt For: 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
 10 / 20 / 2017
Transaction ID : SA11AI.42969
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. WAGGONER 925, RICHARD, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 21406 WESTOVER CIR
 City RIVERSIDE State CA Zip Code 92518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 24 / 2017
Transaction ID : SA11AI.42992
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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 223 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WAKEFIELD 303, PATRICIA M, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 201 BLACKLAND DR NW
 City ATLANTA State GA Zip Code 30342
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 25 / 2017**
Transaction ID : SA11AI.43009
 Amount of Each Receipt this Period 300.00
 Memo Item

B. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt **10 / 12 / 2017**
Transaction ID : SA11AI.44541
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **10 / 12 / 2017**
Transaction ID : SA11AI.44542
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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 224 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44543
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44544
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44545
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 225 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44546
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44547
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44548
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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 226 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 10 / 16 / 2017
Transaction ID : SA11AI.44549
 Amount of Each Receipt this Period 25.00
 Memo Item

B. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 22 / 2017
Transaction ID : SA11AI.44550
 Amount of Each Receipt this Period 25.00
 Memo Item

C. WALL 770, HENRY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6025 JESSAMINE ST
 City HOUSTON State TX Zip Code 77081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PICKERING LLC Occupation (for Individual) ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 11 / 22 / 2017
Transaction ID : SA11AI.44551
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
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 227 OF 274
	<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)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. WALL 770, HENRY, , ,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 22 / 2017
Mailing Address 6025 JESSAMINE ST		Transaction ID : SA11AI.44552
City HOUSTON	State TX	Zip Code 77081
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00	
Name of Employer (for Individual) PICKERING LLC	Occupation (for Individual) ENGINEER	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. WALLACE 880, COYE, , MR,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2017
Mailing Address PO BOX 241		Transaction ID : SA11AI.43055
City MESILLA PARK	State NM	Zip Code 88047
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. WALLACE 880, COYE, , MR,		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 15 / 2017
Mailing Address PO BOX 241		Transaction ID : SA11AI.43056
City MESILLA PARK	State NM	Zip Code 88047
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 35.00	
Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional).....▶	110.00
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 228 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. WALSH 968, MARTIN, , MR,

Mailing Address 2233 ALA WAI BLVD
APT 14B

City HONOLULU State HI Zip Code 96815

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 ▼
225.00

Date of Receipt
MM / DD / YYYY
07 / 04 / 2017

Transaction ID : **SA11AI.43072**

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. WALSH 968, MARTIN, , MR,

Mailing Address 2233 ALA WAI BLVD
APT 14B

City HONOLULU State HI Zip Code 96815

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 ▼
275.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2017

Transaction ID : **SA11AI.43073**

Amount of Each Receipt this Period
50.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. WALTER 762, EUGENE J, , MR,

Mailing Address 1013 N CEDAR ST

City MUENSTER State TX Zip Code 76252

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

Name of Employer (for Individual) Occupation (for Individual)
NONE RETIRED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
280.00

Date of Receipt
MM / DD / YYYY
08 / 09 / 2017

Transaction ID : **SA11AI.43076**

Amount of Each Receipt this Period
105.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 205.00

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 229 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WARD 760, JOHNNY W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 W BALL ST
 City WEATHERFORD State TX Zip Code 76086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WARD TRUCKING LLC TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 22 / 2017
Transaction ID : SA11AI.43112
 Amount of Each Receipt this Period 100.00
 Memo Item

B. WARD 760, JOHNNY W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1431 W BALL ST
 City WEATHERFORD State TX Zip Code 76086
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 WARD TRUCKING LLC TRUCKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 12 / 29 / 2017
Transaction ID : SA11AI.43113
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WHITE 295, JERRI S, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 470 E LEGETTE RD
 City MARION State SC Zip Code 29571
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 NONE RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2017
Transaction ID : SA11AI.43388
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 450.00
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 230 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WHITE 680, MARGIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 N 209TH AVE
 City ELKHORN State NE Zip Code 68022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 08 / 30 / 2017
Transaction ID : SA11AI.43403
 Amount of Each Receipt this Period 50.00
 Memo Item

B. WHITE 680, MARGIE, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1403 N 209TH AVE
 City ELKHORN State NE Zip Code 68022
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt 11 / 29 / 2017
Transaction ID : SA11AI.43404
 Amount of Each Receipt this Period 50.00
 Memo Item

C. WHITE 769, ARLEN, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 902 N MAIN ST
 City SAN ANGELO State TX Zip Code 76903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt 07 / 26 / 2017
Transaction ID : SA11AI.43409
 Amount of Each Receipt this Period 100.00
 Memo Item

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 231 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WIGGINS 277, ELIZABETH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5715 GREENBAY DR

City DURHAM	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2017
Transaction ID : SA11AI.43475

Amount of Each Receipt this Period
 75.00

Memo Item

B. WIGGINS 277, ELIZABETH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5715 GREENBAY DR

City DURHAM	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2017
Transaction ID : SA11AI.43476

Amount of Each Receipt this Period
 40.00

Memo Item

C. WIGGINS 277, ELIZABETH, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5715 GREENBAY DR

City DURHAM	State NC	Zip Code 27712
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NONE		Occupation (for Individual) RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 23 / 2017
Transaction ID : SA11AI.43477

Amount of Each Receipt this Period
 75.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	190.00
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 232 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WILCHECK 675, RONALD, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 705 CLOUGH ST

City NICKERSON	State KS	Zip Code 67561
-------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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	/	2017

Transaction ID : SA11AI.43488

Amount of Each Receipt this Period
200.00

Memo Item

B. WILLETT 484, DONALD A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3557 KINGS MILL RD

City NORTH BRANCH	State MI	Zip Code 48461
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2017

Transaction ID : SA11AI.43529

Amount of Each Receipt this Period
350.00

Memo Item

C. WILLETT 484, DONALD A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3557 KINGS MILL RD

City NORTH BRANCH	State MI	Zip Code 48461
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2017

Transaction ID : SA11AI.43530

Amount of Each Receipt this Period
350.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	900.00
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 233 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WILLEY 210, RAYMOND A, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7068 DUCKETTS LN APT 101

City ELKRIDGE	State MD	Zip Code 21075
------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
10		12		2017

Transaction ID : SA11AI.43531

Amount of Each Receipt this Period
100.00

Memo Item

B. WILLIAMS 463, DAVID, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5122 N STATE ROAD 39

City LA PORTE	State IN	Zip Code 46350
------------------	-------------	-------------------

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

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

Receipt For:
 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		04		2017

Transaction ID : SA11AI.43567

Amount of Each Receipt this Period
250.00

Memo Item

C. WILLIAMS 631, EUGENE, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 701 BARNES RD

City SAINT LOUIS	State MO	Zip Code 63124
---------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
12		18		2017

Transaction ID : SA11AI.43571

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 234 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WILLIAMSON 338, ROBERT U, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5720 BETHLEHEM RD
 City MULBERRY State FL Zip Code 33860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) TECHNICAL CONSULTANT
 Receipt For: 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
 11 / 03 / 2017
Transaction ID : SA11AI.43598
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. WILSON 271, JEAN, , MS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 142 WOODMARK CT
 City WINSTON SALEM State NC Zip Code 27104
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: 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 / 2017
Transaction ID : SA11AI.43612
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. WILSON 797, MARY LOU, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 GREEN TREE BLVD
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: 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
 11 / 29 / 2017
Transaction ID : SA11AI.43647
 Amount of Each Receipt this Period
 100.00
 Memo Item

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 235 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WILSON 797, MARY LOU, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4501 GREEN TREE BLVD
 City MIDLAND State TX Zip Code 79707
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 18 / 2017
Transaction ID : SA11AI.43648
 Amount of Each Receipt this Period: 50.00
 Memo Item

B. WINSTEAD 275, LACY W, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1191
 City ROXBORO State NC Zip Code 27573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 02 / 2017
Transaction ID : SA11AI.43684
 Amount of Each Receipt this Period: 100.00
 Memo Item

C. WITCHER 720, FRANK J, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1512 N LINCOLN ST
 City CABOT State AR Zip Code 72023
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STEVENSON INC Occupation (for Individual) MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 11 / 23 / 2017
Transaction ID : SA11AI.43708
 Amount of Each Receipt this Period: 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	225.00
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 236 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WOLLEN 680, THOMAS L, , MR,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 341

City ELKHORN	State NE	Zip Code 68022
-----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
305.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2017

Transaction ID : SA11AI.43763

Amount of Each Receipt this Period
105.00

Memo Item

B. WOOD 295, BARBARA T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 21ST AVE S

City N MYRTLE BCH	State SC	Zip Code 29582
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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		16		2017

Transaction ID : SA11AI.43776

Amount of Each Receipt this Period
100.00

Memo Item

C. WOOD 295, BARBARA T, , MS,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 502 21ST AVE S

City N MYRTLE BCH	State SC	Zip Code 29582
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
11		16		2017

Transaction ID : SA11AI.43777

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	305.00
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 237 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WOODINGTON 465, MARK, , MR,
 Mailing Address 52518 GLENMORE CT

City GRANGER State IN Zip Code 46530

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

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 11 / 20 / 2017
Transaction ID : SA11AI.43798

Amount of Each Receipt this Period
 50.00

Memo Item

B. WRIGHT 630, RALPH, , MR,
 Mailing Address 708 SUMMER OAK DR

City BALLWIN State MO Zip Code 63021

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

Name of Employer (for Individual) DEPT OF DEFENSE Occupation (for Individual) FUEL LOGISTICS MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 07 / 10 / 2017
Transaction ID : SA11AI.43856

Amount of Each Receipt this Period
 100.00

Memo Item

C. WRIGHT 630, RALPH, , MR,
 Mailing Address 708 SUMMER OAK DR

City BALLWIN State MO Zip Code 63021

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

Name of Employer (for Individual) DEPT OF DEFENSE Occupation (for Individual) FUEL LOGISTICS MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 10 / 10 / 2017
Transaction ID : SA11AI.43857

Amount of Each Receipt this Period
 100.00

Memo Item

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: PAGE 238 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. WRIGHT 630, RALPH, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 708 SUMMER OAK DR
 City BALLWIN State MO Zip Code 63021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEPT OF DEFENSE Occupation (for Individual) FUEL LOGISTICS MANAGEMENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 01 / 2017**
Transaction ID : SA11AI.43858
 Amount of Each Receipt this Period - 100.00
 Memo Item

B. WYNN 310, JOHN E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 LAKEWOOD DR
 City WARNER ROBINS State GA Zip Code 31088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 17 / 2017**
Transaction ID : SA11AI.43891
 Amount of Each Receipt this Period 100.00
 Memo Item

C. WYNN 310, JOHN E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 LAKEWOOD DR
 City WARNER ROBINS State GA Zip Code 31088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **10 / 17 / 2017**
Transaction ID : SA11AI.43892
 Amount of Each Receipt this Period 100.00
 Memo Item

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 239 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. WYNN 310, JOHN E, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 LAKEWOOD DR
 City WARNER ROBINS State GA Zip Code 31088
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **11 / 16 / 2017**
Transaction ID : SA11AI.43893
 Amount of Each Receipt this Period 100.00
 Memo Item

B. YEIGH 826, BRENT P, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50628
 City CASPER State WY Zip Code 82605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 14 / 2017**
Transaction ID : SA11AI.43921
 Amount of Each Receipt this Period 50.00
 Memo Item

C. YEIGH 826, BRENT P, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 50628
 City CASPER State WY Zip Code 82605
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt **11 / 08 / 2017**
Transaction ID : SA11AI.43922
 Amount of Each Receipt this Period 100.00
 Memo Item

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 240 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. YOUNG 526, LINDA S, , MRS,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 507 VERNON ST
 APT 210

City W BURLINGTON	State IA	Zip Code 52655
----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 12 / 20 / 2017

Transaction ID : SA11AI.43957

Amount of Each Receipt this Period
 100.00

Memo Item

B. ZABEL 731, ALBERT, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7230 NW 115TH ST

City OKLAHOMA CITY	State OK	Zip Code 73162
-----------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 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
 11 / 20 / 2017

Transaction ID : SA11AI.43985

Amount of Each Receipt this Period
 100.00

Memo Item

C. ZUBAL 160, THOMAS, , MR,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 212 CLARK AVE

City BUTLER	State PA	Zip Code 16002
----------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
 1050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 04 / 2017

Transaction ID : SA11AI.44053

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 241 OF 274
	<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)
TEA PARTY MAJORITY FUND

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ZURANSKI 461, ROSEMARIE F, , MS,

Mailing Address 411 EAGLE CREST DR

City BROWNSBURG	State IN	Zip Code 46112
--------------------	-------------	-------------------

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

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2017

Transaction ID : SA11AI.44058

Amount of Each Receipt this Period
105.00

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	95817.98

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

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

FOR LINE NUMBER: PAGE 242 OF 274
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

A. INFOCISION MANAGEMENT CORP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 325 SPRINGSIDE DRIVE
 City AKRON State OH Zip Code 44333
 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 ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 18 / 2017
Transaction ID : SA15.44641
 Amount of Each Receipt this Period
 250.00
 Memo Item
REFUND

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

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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)
TEA PARTY MAJORITY FUND

A. BAKER HOSTETLER LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement LEGAL SERVICES

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement 07 / 08 / 2017

FEC Identification Number C00566174
Transaction ID : SB21B.29032

Amount of Each Disbursement this Period 2500.00

Memo Item

B. BAKER HOSTETLER LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement LEGAL SERVICES

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement 08 / 02 / 2017

FEC Identification Number C00566174
Transaction ID : SB21B.29033

Amount of Each Disbursement this Period 2500.00

Memo Item

C. BAKER HOSTETLER LLP

Full Name (Last, First, Middle Initial)

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement LEGAL SERVICES

Candidate Name **TEA PARTY MAJORITY FUND**

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

State: District:

Date of Disbursement 09 / 02 / 2017

FEC Identification Number C00566174
Transaction ID : SB21B.29034

Amount of Each Disbursement this Period 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 7500.00

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. BAKER HOSTETLER LLP

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
LEGAL SERVICES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
10 / 01 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.29035
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BAKER HOSTETLER LLP

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
LEGAL SERVICES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
11 / 02 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.29036
Amount of Each Disbursement this Period
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BAKER HOSTETLER LLP

Mailing Address 1050 CONNECTICUT AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
LEGAL SERVICES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
12 / 01 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.29037
Amount of Each Disbursement this Period
2500.00

Memo Item

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

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

7500.00

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CAPITALONE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		03		2017

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
---	-----------

City SUGARLAND State TX Zip Code 77478

Transaction ID : SB21B.29074

Purpose of Disbursement
AMEX COLLECTION FEE

001
Category/ Type

Amount of Each Disbursement this Period

7.95

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		05		2017

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
---	-----------

City SUGARLAND State TX Zip Code 77478

Transaction ID : SB21B.29080

Purpose of Disbursement
AMEX DISCOUNT FEES

001
Category/ Type

Amount of Each Disbursement this Period

221.43

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		05		2017

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
---	-----------

City SUGARLAND State TX Zip Code 77478

Transaction ID : SB21B.29087

Purpose of Disbursement
MERCHANT DISCOUNT FEES

001
Category/ Type

Amount of Each Disbursement this Period

84.07

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

State: District:

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

313.45

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CAPITALONE BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
---	-----------

Transaction ID : SB21B.29093

Amount of Each Disbursement this Period

6	6	9	.	5	3
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Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BOFA MERCHANT SERVICES

001
Category/ Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			0	5			2	0	1	7		

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
---	-----------

Transaction ID : SB21B.29099

Amount of Each Disbursement this Period

1	2	1	5	.	7	5
---	---	---	---	---	---	---

Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
BOFA MERCHANT SERVICES INTERCHANGE

001
Category/ Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Date of Disbursement

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

Mailing Address 2353 TOWN CENTER DR

FEC Identification Number

C	C00566174
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Transaction ID : SB21B.29105

Amount of Each Disbursement this Period

2	0	.	0	0
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Memo Item

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
USAePAY FEE

001
Category/ Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

1	9	0	5	.	2	8
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TOTAL This Period (last page this line number only).....▶

1	9	0	5	.	2	8
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 07 / 25 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29111
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement ACCOUNT ANALYSIS CHARGE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 395.01
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 08 / 01 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29075
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX COLLECTION FEE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 7.95
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 08 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29088
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement MERCHANT DISCOUNT FEES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 67.75
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	470.71
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 08 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BOFA MERCHANT SERVICES		FEC Identification Number C00566174 Transaction ID : SB21B.29094
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 640.27
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 08 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BOFA MERCHANT SERVICES INTERCHANGE		FEC Identification Number C00566174 Transaction ID : SB21B.29100
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 968.17
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 08 / 07 / 2017
Mailing Address 2353 TOWN CENTER DR		
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX DISCOUNT FEES		FEC Identification Number C00566174 Transaction ID : SB21B.29081
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 174.08
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

1782.52

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 08 / 08 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29106	
Purpose of Disbursement USAEPAY FEE			Amount of Each Disbursement this Period 20.00	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 08 / 22 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29112	
Purpose of Disbursement ACCOUNT ANALYSIS CHARGE			Amount of Each Disbursement this Period 261.89	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 09 / 01 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29076	
Purpose of Disbursement AMEX COLLECTION FEE			Amount of Each Disbursement this Period 7.95	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

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

289.84

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
AMEX DISCOUNT FEES

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2017

FEC Identification Number

C C00566174
Transaction ID : SB21B.29082
Amount of Each Disbursement this Period
 261.97

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
MERCHANT CHARGEBACK FEE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2017

FEC Identification Number

C C00566174
Transaction ID : SB21B.29086
Amount of Each Disbursement this Period
 30.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement
MERCHANT DISCOUNT FEES

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 05 / 2017

FEC Identification Number

C C00566174
Transaction ID : SB21B.29088
Amount of Each Disbursement this Period
 99.55

Memo Item

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

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

391.52

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29095 Amount of Each Disbursement this Period 641.91	
City SUGARLAND	State TX	Zip Code 77478	Category/ Type 001
Purpose of Disbursement BOFA MERCHANT SERVICES		Candidate Name TEA PARTY MAJORITY FUND	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 09 / 05 / 2017	
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29101 Amount of Each Disbursement this Period 1422.32	
City SUGARLAND	State TX	Zip Code 77478	Category/ Type 001
Purpose of Disbursement BOFA MERCHANT SERVICES INTERCHANGE		Candidate Name TEA PARTY MAJORITY FUND	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 09 / 07 / 2017	
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29107 Amount of Each Disbursement this Period 20.00	
City SUGARLAND	State TX	Zip Code 77478	Category/ Type 001
Purpose of Disbursement USAePAY FEE		Candidate Name TEA PARTY MAJORITY FUND	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	2084.23
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 09 / 22 / 2017		
Mailing Address 2353 TOWN CENTER DR					
City SUGARLAND		State TX	Zip Code 77478		
Purpose of Disbursement ACCOUNT ANALYSIS CHARGE				Category/ Type 001	
Candidate Name TEA PARTY MAJORITY FUND					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		<input type="checkbox"/> Memo Item			

FEC Identification Number
C00566174
Transaction ID : SB21B.29113
Amount of Each Disbursement this Period
336.18

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 10 / 02 / 2017		
Mailing Address 2353 TOWN CENTER DR					
City SUGARLAND		State TX	Zip Code 77478		
Purpose of Disbursement AMEX COLLECTION FEE				Category/ Type 001	
Candidate Name TEA PARTY MAJORITY FUND					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		<input type="checkbox"/> Memo Item			

FEC Identification Number
C00566174
Transaction ID : SB21B.29077
Amount of Each Disbursement this Period
7.95

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 10 / 04 / 2017		
Mailing Address 2353 TOWN CENTER DR					
City SUGARLAND		State TX	Zip Code 77478		
Purpose of Disbursement MERCHANT DISCOUNT FEES				Category/ Type 001	
Candidate Name TEA PARTY MAJORITY FUND					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:		<input type="checkbox"/> Memo Item			

FEC Identification Number
C00566174
Transaction ID : SB21B.2909c
Amount of Each Disbursement this Period
81.63

SUBTOTAL of Disbursements This Page (optional).....▶	425.76
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 10 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29096
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BOFA MERCHANT SERVICES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 526.63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 10 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29102
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BOFA MERCHANT SERVICES INTERCHANGE		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 1185.03
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 10 / 05 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29083
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX DISCOUNT FEES		Category/Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 150.08
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

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

1861.74

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)
TEA PARTY MAJORITY FUND

A. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement USAePAY FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 10 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29108

Amount of Each Disbursement this Period: 20.00

Memo Item

B. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement ACCOUNT ANALYSIS CHARGE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 24 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29114

Amount of Each Disbursement this Period: 311.08

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement AMEX COLLECTION FEE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 01 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29078

Amount of Each Disbursement this Period: 7.95

Memo Item

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

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

339.03

**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)
TEA PARTY MAJORITY FUND

A. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement AMEX DISCOUNT FEES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29084

Amount of Each Disbursement this Period: 162.01

Memo Item

B. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement MERCHANT DISCOUNT FEES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29091

Amount of Each Disbursement this Period: 69.12

Memo Item

C. CAPITALONE BANK

Full Name (Last, First, Middle Initial)

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement BOFA MERCHANT SERVICES

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 06 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29097

Amount of Each Disbursement this Period: 584.79

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 815.92

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement BOFA MERCHANT SERVICES INTERCHANGE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2017

FEC Identification Number

C00566174

Transaction ID : SB21B.29103

Amount of Each Disbursement this Period

975.20

Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement USAePAY FEE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2017

FEC Identification Number

C00566174

Transaction ID : SB21B.29109

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement ACCOUNT ANALYSIS CHARGE

001
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2017

FEC Identification Number

C00566174

Transaction ID : SB21B.29111

Amount of Each Disbursement this Period

315.33

Memo Item

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

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

1310.53

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 12 / 01 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29079	
Purpose of Disbursement AMEX COLLECTION FEE			Amount of Each Disbursement this Period 7.95	
Candidate Name TEA PARTY MAJORITY FUND			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. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 12 / 04 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29092	
Purpose of Disbursement MERCHANT DISCOUNT FEES			Amount of Each Disbursement this Period 71.04	
Candidate Name TEA PARTY MAJORITY FUND			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. CAPITALONE BANK			Date of Disbursement MM / DD / YYYY 12 / 04 / 2017	
Mailing Address 2353 TOWN CENTER DR				
City SUGARLAND	State TX	Zip Code 77478	FEC Identification Number C00566174 Transaction ID : SB21B.29098	
Purpose of Disbursement BOFA MERCHANT SERVICES			Amount of Each Disbursement this Period 646.17	
Candidate Name TEA PARTY MAJORITY FUND			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).....▶	725.16
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 04 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29104
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement BOFA MERCHANT SERVICES INTERCHANGE		Category/ Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 1005.40
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 05 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29085
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement AMEX DISCOUNT FEES		Category/ Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 218.36
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. CAPITALONE BANK		Date of Disbursement MM / DD / YYYY 12 / 07 / 2017
Mailing Address 2353 TOWN CENTER DR		FEC Identification Number C00566174 Transaction ID : SB21B.29111
City SUGARLAND	State TX	Zip Code 77478
Purpose of Disbursement USAEPAY FEE		Category/ Type 001
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 20.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

1243.76

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)
A. CAPITALONE BANK

Mailing Address 2353 TOWN CENTER DR

City SUGARLAND State TX Zip Code 77478

Purpose of Disbursement ACCOUNT ANALYSIS CHARGE

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
12 / 22 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29116
Amount of Each Disbursement this Period: 320.64

Memo Item

Full Name (Last, First, Middle Initial)
B. IMAGINE IT DESIGN LLC

Mailing Address 100 TEAL LANE #34

City LAFAYETTE State LA Zip Code 70607

Purpose of Disbursement GRAPHIC DESIGN SUPPORT

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.44068
Amount of Each Disbursement this Period: 3470.56

Memo Item

Full Name (Last, First, Middle Initial)
C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

Candidate Name **TEA PARTY MAJORITY FUND**

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
07 / 11 / 2017

FEC Identification Number: C00566174
Transaction ID : SB21B.29064
Amount of Each Disbursement this Period: 3023.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 6814.86

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

001
 002
 003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C00566174
Transaction ID : SB21B.29065
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

001
 002
 003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C00566174
Transaction ID : SB21B.29066
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

001
 002
 003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C00566174
Transaction ID : SB21B.29067
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB21B.29068

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB21B.29069

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement SOLICITATION CALLS

003
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB21B.29070

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
STATIONARY POSTAGE & ADMINISTRATIVE EXPENSES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
10 / 20 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.44070
Amount of Each Disbursement this Period
854.55

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
SOLICITATION CALLS

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
11 / 10 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.29071
Amount of Each Disbursement this Period
5083.25

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
SOLICITATION CALLS

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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
11 / 28 / 2017

FEC Identification Number
C C00566174
Transaction ID : SB21B.29072
Amount of Each Disbursement this Period
2819.01

Memo Item

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

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

8756.81

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. INFOCISION MANAGEMENT CORP			Date of Disbursement MM / DD / YYYY 12 / 12 / 2017	
Mailing Address 325 SPRINGSIDE DRIVE			FEC Identification Number C00566174 Transaction ID : SB21B.29073	
City AKRON	State OH	Zip Code 44333	Amount of Each Disbursement this Period 1567.47	
Purpose of Disbursement SOLICITATION CALLS		Category/ Type 003	Memo Item <input type="checkbox"/>	
Candidate Name TEA PARTY MAJORITY FUND		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. MACKENZIE & COMPANY			Date of Disbursement MM / DD / YYYY 07 / 08 / 2017	
Mailing Address 2776 S ARLINGTON MILL DRIVE #806			FEC Identification Number C00566174 Transaction ID : SB21B.29038	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 3500.00	
Purpose of Disbursement CONSULTING - COMPLIANCE		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name TEA PARTY MAJORITY FUND		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. MACKENZIE & COMPANY			Date of Disbursement MM / DD / YYYY 07 / 08 / 2017	
Mailing Address 2776 S ARLINGTON MILL DRIVE #806			FEC Identification Number C00566174 Transaction ID : SB21B.44071	
City ARLINGTON	State VA	Zip Code 22206	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement CONSULTING - COMPLIANCE		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name TEA PARTY MAJORITY FUND		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	6067.47
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. MACKENZIE & COMPANY		Date of Disbursement MM / DD / YYYY 08 / 02 / 2017
Mailing Address 2776 S ARLINGTON MILL DRIVE #806		FEC Identification Number C00566174 Transaction ID : SB21B.29040
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement CONSULTING - COMPLIANCE		001 Category/ Type
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 3500.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. MACKENZIE & COMPANY		Date of Disbursement MM / DD / YYYY 09 / 02 / 2017
Mailing Address 2776 S ARLINGTON MILL DRIVE #806		FEC Identification Number C00566174 Transaction ID : SB21B.29041
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement CONSULTING - COMPLIANCE		001 Category/ Type
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 3500.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) C. MACKENZIE & COMPANY		Date of Disbursement MM / DD / YYYY 10 / 01 / 2017
Mailing Address 2776 S ARLINGTON MILL DRIVE #806		FEC Identification Number C00566174 Transaction ID : SB21B.29042
City ARLINGTON	State VA	Zip Code 22206
Purpose of Disbursement CONSULTING - COMPLIANCE		001 Category/ Type
Candidate Name TEA PARTY MAJORITY FUND		Amount of Each Disbursement this Period 3500.00
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) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

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

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

10500.00

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C00566174

Transaction ID : SB21B.29043

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C00566174

Transaction ID : SB21B.29044

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DRIVE #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C00566174

Transaction ID : SB21B.29045

Amount of Each Disbursement this Period

3500.00

Memo Item

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

7000.00

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 10 / 31 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44090	
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Amount of Each Disbursement this Period 523.03	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 11 / 06 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44074	
Purpose of Disbursement REMITTANCE FEE			Amount of Each Disbursement this Period 0.25	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 11 / 09 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44074	
Purpose of Disbursement REMITTANCE FEE			Amount of Each Disbursement this Period 0.25	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

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

523.53

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 11 / 21 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44076	
Purpose of Disbursement REMITTANCE FEE			Amount of Each Disbursement this Period 0.25	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 11 / 30 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44636	
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Amount of Each Disbursement this Period 4.17	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) C. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 12 / 06 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44077	
Purpose of Disbursement REMITTANCE FEE			Amount of Each Disbursement this Period 0.25	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

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

4.67

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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 12 / 20 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44078	
Purpose of Disbursement REMITTANCE FEE			Amount of Each Disbursement this Period 0.25	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) B. RAISE THE MONEY INC			Date of Disbursement MM / DD / YYYY 12 / 31 / 2017	
Mailing Address PO BOX 26466				
City LITTLE ROCK	State AR	Zip Code 72221	FEC Identification Number C00566174 Transaction ID : SB21B.44637	
Purpose of Disbursement CREDIT CARD PROCESSING FEES			Amount of Each Disbursement this Period 4.66	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

Full Name (Last, First, Middle Initial) C. STRATEGIC CAMPAIGN GROUP			Date of Disbursement MM / DD / YYYY 07 / 11 / 2017	
Mailing Address 191 MAIN STREET SUITE 310				
City ANNAPOLIS	State MD	Zip Code 21401	FEC Identification Number C00566174 Transaction ID : SB21B.44078	
Purpose of Disbursement PARAMOUNT COMMUNICATIONS SOCIAL MEDIA FEES			Amount of Each Disbursement this Period 300.00	
Candidate Name TEA PARTY MAJORITY FUND			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:	Category/Type 001			

SUBTOTAL of Disbursements This Page (optional).....▶	304.91
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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. STRATEGIC CAMPAIGN GROUP

Mailing Address 191 MAIN STREET
SUITE 310

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
DATA FILE PROCESSING & UPDATES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.29046

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. STRATEGIC CAMPAIGN GROUP

Mailing Address 191 MAIN STREET
SUITE 310

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
DATA FILE UPDATES

Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB21B.29048

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

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 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)
TEA PARTY MAJORITY FUND

A. THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

Mailing Address 2776 S ARLINGTON MILL DRIVE # 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 24 / 2017

FEC Identification Number C00457291

Transaction ID : SB23.44087

Amount of Each Disbursement this Period 600.00

Memo Item

B. THE CONSERVATIVE STRIKEFORCE

Full Name (Last, First, Middle Initial)

Mailing Address 2776 S ARLINGTON MILL DRIVE # 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name THE CONSERVATIVE STRIKEFORCE

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 26 / 2017

FEC Identification Number C00457291

Transaction ID : SB23.44089

Amount of Each Disbursement this Period 1000.00

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).....▶	1600.00
TOTAL This Period (last page this line number only).....▶	1600.00

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB29.29053

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB29.29054

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

C C00566174

Transaction ID : SB29.29055

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 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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		28		2017

Mailing Address 325 SPRINGSIDE DRIVE

FEC Identification Number

C C00566174

City AKRON State OH Zip Code 44333

Transaction ID : SB29.29056

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Amount of Each Disbursement this Period

28277.59

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2017

Mailing Address 325 SPRINGSIDE DRIVE

FEC Identification Number

C C00566174

City AKRON State OH Zip Code 44333

Transaction ID : SB29.29057

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Amount of Each Disbursement this Period

33378.30

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		05		2017

Mailing Address 325 SPRINGSIDE DRIVE

FEC Identification Number

C C00566174

City AKRON State OH Zip Code 44333

Transaction ID : SB29.29058

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

004
Category/
Type

Amount of Each Disbursement this Period

48235.01

Candidate Name

TEA PARTY MAJORITY FUND

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

Memo Item

State: District:

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

109890.90

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 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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial)

A. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

001
 002
 003
 004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2017

FEC Identification Number

C00566174

Transaction ID : SB29.29059

Amount of Each Disbursement this Period

16577.81

Memo Item

Full Name (Last, First, Middle Initial)

B. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

001
 002
 003
 004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 10 / 2017

FEC Identification Number

C00566174

Transaction ID : SB29.29060

Amount of Each Disbursement this Period

45749.22

Memo Item

Full Name (Last, First, Middle Initial)

C. INFOCISION MANAGEMENT CORP

Mailing Address 325 SPRINGSIDE DRIVE

City AKRON State OH Zip Code 44333

Purpose of Disbursement
VOTER CONTACT CALLS (PRO-TRUMP AGENDA)

001
 002
 003
 004
Category/
Type

Candidate Name
TEA PARTY MAJORITY FUND

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

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 28 / 2017

FEC Identification Number

C00566174

Transaction ID : SB29.29061

Amount of Each Disbursement this Period

25371.13

Memo Item

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

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

87698.16

**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)
TEA PARTY MAJORITY FUND

Full Name (Last, First, Middle Initial) A. INFOCISION MANAGEMENT CORP		Date of Disbursement MM / DD / YYYY 12 / 12 / 2017
Mailing Address 325 SPRINGSIDE DRIVE		FEC Identification Number C 00566174 Transaction ID : SB29.29062
City AKRON	State OH	Zip Code 44333
Purpose of Disbursement VOTER CONTACT CALLS (PRO-TRUMP AGENDA)		Amount of Each Disbursement this Period 14107.19
Candidate Name TEA PARTY MAJORITY FUND		<input type="checkbox"/> Memo Item
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. STRATEGIC CAMPAIGN GROUP		Date of Disbursement MM / DD / YYYY 12 / 07 / 2017
Mailing Address 191 MAIN STREET SUITE 310		FEC Identification Number C 00566174 Transaction ID : SB29.29051
City ANNAPOLIS	State MD	Zip Code 21401
Purpose of Disbursement FACEBOOK AD (PRO-TRUMP AGENDA)		Amount of Each Disbursement this Period 2064.59
Candidate Name TEA PARTY MAJORITY FUND		<input type="checkbox"/> Memo Item
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
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		<input type="checkbox"/> Memo Item
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)..... ▶

16171.78

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

292588.18