

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

True North PAC

ADDRESS (number and street) 901 N Washington St, Suite 700

Check if different than previously reported. (ACC) Alexandria VA 22314

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00571000

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

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

5. Covering Period 04 01 2020 through 06 30 2020

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

Signature of Treasurer Koch, Timothy A., , , [Electronically Filed] Date 07 14 2020

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

True North PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="23579.84"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="45312.49"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="87750.00"/>	<input type="text" value="200093.88"/>
(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="133062.49"/>	<input type="text" value="223673.72"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="71336.94"/>	<input type="text" value="161948.17"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="61725.55"/>	<input type="text" value="61725.55"/>
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="7500.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

True North PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	43750.00	79100.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	43750.00	79100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	44000.00	82800.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	87750.00	161900.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	38193.88
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	87750.00	200093.88
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	87750.00	200093.88

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	31336.94	94148.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	31336.94	94148.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40000.00	67800.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	71336.94	161948.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	71336.94	161948.17

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)	87750.00	161900.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	87750.00	161900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	31336.94	94148.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	31336.94	94148.17

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 26
	(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)
True North PAC

A. Betz, Nathaniel, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2411 Belmont Dr

City Anchorage	State AK	Zip Code 99517
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Coastal Villages Region Fund	Occupation (for Individual) Community Development
---	--

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
05		20		2020

Transaction ID : SA11AI.7017

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

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

Mailing Address PO Box 310

City Galliano	State LA	Zip Code 70354
------------------	-------------	-------------------

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

Name of Employer (for Individual) Galliano Marine Service	Occupation (for Individual) President
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

Transaction ID : SA11AI.7081

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

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

Mailing Address 65 East 55th St
17th Flr

City New York	State NY	Zip Code 10022
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Secure Identity LLC	Occupation (for Individual) Executive
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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
04		21		2020

Transaction ID : SA11AI.6991

Amount of Each Receipt this Period
1500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line 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 7 OF 26
	(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)
True North PAC

A. Crane, David, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6233 Radcliff Road

City Alexandria	State VA	Zip Code 22307
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Self	Occupation (for Individual) Consultant
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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
05	/	06	/	2020

Transaction ID : SA11AI.7005

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

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

Mailing Address 866 S Figueroa St Ste. 1800

City Los Angeles	State CA	Zip Code 90017
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Oakmont Corporation	Occupation (for Individual) Chairman
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	25	/	2020

Transaction ID : SA11AI.7071

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

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

Mailing Address 405 Talahi Road SE

City Vienna	State VA	Zip Code 22180
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Hoffman Silver Gilman & Biasco	Occupation (for Individual) Attorney
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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
04	/	24	/	2020

Transaction ID : SA11AI.6995

Amount of Each Receipt this Period
250.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	6250.00
TOTAL This Period (last page this line 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 26
	(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)
True North PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Gilman, Bradley, , ,		Date of Receipt
Mailing Address 405 Talahi Road SE		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City Vienna	State VA	Zip Code 22180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.7048
Name of Employer (for Individual) Hoffman Silver Gilman & Biasco		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1250.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gilman, Bradley, , ,		Date of Receipt
Mailing Address 405 Talahi Road SE		<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2020"/>
City Vienna	State VA	Zip Code 22180
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.7049
Name of Employer (for Individual) Hoffman Silver Gilman & Biasco		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1500.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hohlt, Deborah, , ,		Date of Receipt
Mailing Address 7901 Kent Road		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2020"/>
City Alexandria	State VA	Zip Code 22308
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.7068
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) Consultant		<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 26
	<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)
True North PAC

A. Nau, John, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 130130
 City Houston State TX Zip Code 77219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Silver Eagle Distributors Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 30 / 2020
Transaction ID : SA11AI.7080
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

B. Petrizzo, T., J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6816 Sorrel Street
 City McLean State VA Zip Code 22101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Petrizzo Group Occupation (for Individual) Government Relations Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2020
Transaction ID : SA11AI.7103
 Amount of Each Receipt this Period 1000.00
 Memo Item Contribution

C. Shillman, Robert, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 676267
 City Rcho Santa Fe State CA Zip Code 92067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cognex Occupation (for Individual) Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 29 / 2020
Transaction ID : SA11AI.7066
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line 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 26
	<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)
True North PAC

A. Sullivan, Mary, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29360 Lake Road
 City Bay Village State OH Zip Code 44140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2020
Transaction ID : SA11AI.7043
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

B. Sullivan, Thomas, C., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 29360 Lake Road
 City Bay Village State OH Zip Code 44140
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RPM International Inc. Occupation (for Individual) VP, Corporate Development
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 19 / 2020
Transaction ID : SA11AI.7040
 Amount of Each Receipt this Period 5000.00
 Memo Item Contribution

C. Trant, Matt, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 818 Connecticut Ave NW Suite 1100
 City Washington State DC Zip Code 20006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The National Group, LLP Occupation (for Individual) Consultant
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 15 / 2020
Transaction ID : SA11AI.7018
 Amount of Each Receipt this Period 500.00
 Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	10500.00
TOTAL This Period (last page this line 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 26
<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)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wendt, Gregory, , ,

Mailing Address **1 Market Street Ste 2000**

City San Francisco	State CA	Zip Code 94105
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Cap. Research Global Investors	Occupation (for Individual) Partner
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
06 / 22 / 2020

Transaction ID : SA11A1.7032

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

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

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

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	43750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

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

Mailing Address 421 AVIATION WAY

City FREDERICK	State MD	Zip Code 21701
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FEC ID number of contributing federal political committee. **C** C00131185

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

Transaction ID : SA11C.7108

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. AIR LINE PILOTS ASSOCIATION PAC

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

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035451

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

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
06		30		2020

Transaction ID : SA11C.7088

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

C. AMERICAN HOSPITAL ASSOCIATION PAC

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

Mailing Address 325 SEVENTH STREET, NW
SUITE 700

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106146

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

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
06		10		2020

Transaction ID : SA11C.7027

Amount of Each Receipt this Period
1000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7000.00
TOTAL This Period (last page this line 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 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
True North PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
AMERICAN HOTEL AND LODGING ASSOCIATION POLITICAL ACTION COMMITTEE ('HOTELPAC')

Mailing Address 1250 I STREET, NW #1100

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00001198

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

Transaction ID : SA11C.7083

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CHARTER COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE

Mailing Address 400 ATLANTIC STREET
10TH FLOOR

City STAMFORD	State CT	Zip Code 06901
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00426775

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2020

Transaction ID : SA11C.7053

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CONSUMER BRANDS POLITICAL ACTION COMMITTEE ('CONSUMER BRANDS ASSOCIATION PAC')

Mailing Address 1001 19TH STREET N.
7TH FLOOR

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00250068

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2020

Transaction ID : SA11C.7051

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line 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 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. FORD MOTOR COMPANY CIVIC ACTION FUND
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 75000
MC 2250

City DETROIT	State MI	Zip Code 48275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00046474

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 30 / 2020

Transaction ID : SA11C.7086

Amount of Each Receipt this Period
5000.00

Memo Item
Contribution

B. GENERAL ATOMICS POLITICAL ACTION COMMITTEE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85608

City SAN DIEGO	State CA	Zip Code 92186
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00215285

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2020

Transaction ID : SA11C.7026

Amount of Each Receipt this Period
5000.00

Memo Item
Contribution

C. GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00076810

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2020

Transaction ID : SA11C.7092

Amount of Each Receipt this Period
1000.00

Memo Item
Contribution

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line 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 26
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 MASSACHUSETTS AVE., NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

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

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
06		12		2020

Transaction ID : SA11C.7028

Amount of Each Receipt this Period
1000.00

Memo Item Contribution

B. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address ONE CONSTITUTION AVE NE

City WASHINGTON	State DC	Zip Code 20002
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00009282

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2020

Transaction ID : SA11C.7085

Amount of Each Receipt this Period
2500.00

Memo Item Contribution

C. THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1155 F STREET, NW
SUITE 400

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00284885

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		22		2020

Transaction ID : SA11C.7055

Amount of Each Receipt this Period
5000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line 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 16 OF 26
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
True North PAC

A. UNITED PARCEL SERVICE INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 55 GLENLAKE PARKWAY NE
 City ATLANTA State GA Zip Code 30328
 FEC ID number of contributing federal political committee. **C** C00064766
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2020
Transaction ID : SA11C.7084
 Amount of Each Receipt this Period
 5000.00
 Memo Item Contribution

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

Date of Receipt
 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).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	44000.00

**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)
True North PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 23 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.6992**

Amount of Each Disbursement this Period: 58.80

Memo Item

B. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 11 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.7008**

Amount of Each Disbursement this Period: 39.30

Memo Item

C. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 19 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.7014**

Amount of Each Disbursement this Period: 19.80

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 117.90

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 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)
True North PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7015

Amount of Each Disbursement this Period: 58.80

Memo Item

B. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 24 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7073

Amount of Each Disbursement this Period: 195.30

Memo Item

C. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 26 / 2020

FEC Identification Number: C

Transaction ID : SB21B.7074

Amount of Each Disbursement this Period: 195.30

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 449.40

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)
True North PAC

A. Anedot

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 84314

City Baton Rouge State LA Zip Code 70884

Purpose of Disbursement PAC Credit Card Processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.7091**

Amount of Each Disbursement this Period: 195.30

Memo Item

B. Black Rock Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 66 Canal Center Plaza Ste 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
04 / 24 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.7001**

Amount of Each Disbursement this Period: 2500.00

Memo Item

C. Black Rock Group LLC

Full Name (Last, First, Middle Initial)

Mailing Address 66 Canal Center Plaza Ste 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement PAC Strategic Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 28 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.7022**

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5195.30

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)
True North PAC

Full Name (Last, First, Middle Initial) A. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 04 / 24 / 2020
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7003 Amount of Each Disbursement this Period [REDACTED] 1250.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting / Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 05 / 28 / 2020
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7024 Amount of Each Disbursement this Period [REDACTED] 1250.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting / Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Koch & Hoos, LLC		Date of Disbursement MM / DD / YYYY 06 / 29 / 2020
Mailing Address 901 N. Washington St. Suite 700		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7057 Amount of Each Disbursement this Period [REDACTED] 1296.11
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement PAC Accounting / Compliance Services		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 3796.11
TOTAL This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial)

A. MKJ, Inc.

Mailing Address 5905 Gloster Rd

City: Bethesda State: MD Zip Code: 20816

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 24 / 2020

FEC Identification Number

C
Transaction ID : SB21B.6998
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MKJ, Inc.

Mailing Address 5905 Gloster Rd

City: Bethesda State: MD Zip Code: 20816

Purpose of Disbursement
PAC Fundraising Consulting

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 28 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7023
Amount of Each Disbursement this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MKJ, Inc.

Mailing Address 5905 Gloster Rd

City: Bethesda State: MD Zip Code: 20816

Purpose of Disbursement
VOID: Orig. disbursed on 2/20/2020

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2020

FEC Identification Number

C
Transaction ID : SB21B.7029
Amount of Each Disbursement this Period
- 10647.80

Memo Item

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

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

- 647.80

**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)
True North PAC

Full Name (Last, First, Middle Initial) A. MKJ, Inc.		Date of Disbursement MM / DD / YYYY 06 / 15 / 2020	
Mailing Address 5905 Gloster Rd		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7030 Amount of Each Disbursement this Period 10647.80	
City Bethesda	State MD	Zip Code 20816	Category/ Type
Purpose of Disbursement RE-ISSUED PMT: PAC Fundraising Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Rizzo Dukes Group LLC		Date of Disbursement MM / DD / YYYY 04 / 24 / 2020	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.6996 Amount of Each Disbursement this Period 5255.00	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Rizzo Dukes Group LLC		Date of Disbursement MM / DD / YYYY 05 / 28 / 2020	
Mailing Address 1316 Alexandria Ave		FEC Identification Number C [REDACTED] Transaction ID : SB21B.7025 Amount of Each Disbursement this Period 6460.23	
City Alexandria	State VA	Zip Code 22308	Category/ Type
Purpose of Disbursement PAC Fundraising Consulting			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	22363.03
TOTAL This Period (last page this line number only).....▶	31273.94

**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)
True North PAC

Full Name (Last, First, Middle Initial) A. ALASKANS FOR DAN SULLIVAN			Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address 3705 ARCTIC BLVD #447				
City ANCHORAGE	State AK	Zip Code 99503	FEC Identification Number C00570994 Transaction ID : SB23.7077	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period 5000.00	
Candidate Name SULLIVAN, DAN, , ,			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: AK	District: 00			
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) B. ALASKANS FOR DAN SULLIVAN			Date of Disbursement MM / DD / YYYY 06 / 30 / 2020	
Mailing Address 3705 ARCTIC BLVD #447				
City ANCHORAGE	State AK	Zip Code 99503	FEC Identification Number C00570994 Transaction ID : SB23.7079	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period 5000.00	
Candidate Name SULLIVAN, DAN, , ,			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: AK	District: 00			
<input type="checkbox"/> Memo Item				

Full Name (Last, First, Middle Initial) C. BILL CASSIDY FOR US SENATE			Date of Disbursement MM / DD / YYYY 06 / 24 / 2020	
Mailing Address PO BOX 80505				
City BATON ROUGE	State LA	Zip Code 70898	FEC Identification Number C00543983 Transaction ID : SB23.7094	
Purpose of Disbursement Contribution			Amount of Each Disbursement this Period 5000.00	
Candidate Name CASSIDY, WILLIAM, , ,			Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: LA	District: 00			
<input type="checkbox"/> Memo Item				

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

15000.00

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 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)
True North PAC

Full Name (Last, First, Middle Initial)

A. JIM RISCH FOR U.S. SENATE COMMITTEE

Mailing Address 407 W JEFFERSON STREET

City BOISE State ID Zip Code 83702

Purpose of Disbursement Contribution

Candidate Name
RISCH, JAMES, E., ,

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

State: ID District: 00

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2020

FEC Identification Number

C C00440362

Transaction ID : **SB23.7010**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MCCONNELL SENATE COMMITTEE

Mailing Address PO BOX 1496

City LOUISVILLE State KY Zip Code 40201

Purpose of Disbursement Contribution

Candidate Name
MCCONNELL, MITCH, , ,

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

State: KY District: 00

Date of Disbursement

MM / DD / YYYY
06 / 18 / 2020

FEC Identification Number

C C00193342

Transaction ID : **SB23.7033**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. MCSALLY FOR SENATE INC.

Mailing Address 2141 E CAMELBACK ROAD STE 250

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement Contribution

Candidate Name
MCSALLY, MARTHA, , ,

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

State: AZ District: 00

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2020

FEC Identification Number

C C00666040

Transaction ID : **SB23.7031**

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

15000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
True North PAC

Full Name (Last, First, Middle Initial)

A. TEAM GRAHAM, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		18		2020

Mailing Address PO BOX 1801

FEC Identification Number

C	C00458828
---	-----------

City COLUMBIA State SC Zip Code 29202

Transaction ID : SB23.7009

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

5000.00

Candidate Name

GRAHAM, LINDSEY O., , ,

Category/Type

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

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. TEXANS FOR SENATOR JOHN CORNYN INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		29		2020

Mailing Address PO BOX 13026

FEC Identification Number

C	C00369033
---	-----------

City AUSTIN State TX Zip Code 78711

Transaction ID : SB23.7096

Purpose of Disbursement Contribution

Amount of Each Disbursement this Period

5000.00

Candidate Name

CORNYN, JOHN, , ,

Category/Type

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

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Amount of Each Disbursement this Period

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Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

10000.00

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

40000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 26 OF 26
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
True North PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Black Rock Group LLC			Nature of Debt (Purpose): PAC Strategic Consulting
Mailing Address 66 Canal Center Plaza Ste 555			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.7114	
Amount Incurred This Period <input type="text" value="2500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MKJ, Inc.			Nature of Debt (Purpose): PAC Fundraising Consulting
Mailing Address 5905 Gloster Rd			
City Bethesda	State MD	Zip Code 20816	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : SD10.7113	
Amount Incurred This Period <input type="text" value="5000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5000.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="7500.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="7500.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="7500.00"/>