

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Building and Restoring the American Dream Fund

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

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

4. TYPE OF REPORT (Choose One) (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. Carroll, Robert, E., , CPA

Type or Print Name of Treasurer

Signature of Treasurer Carroll, Robert, E., , CPA [Electronically Filed] Date 07 / 15 / 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

Building and Restoring the American Dream Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="31058.42"/>	<input type="text" value="31058.42"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="35363.57"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10000.00"/>	<input type="text" value="30080.15"/>
(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="45363.57"/>	<input type="text" value="61138.57"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21952.33"/>	<input type="text" value="37727.33"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="23411.24"/>	<input type="text" value="23411.24"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Building and Restoring the American Dream Fund

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	5000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	20000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	25000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	5080.15
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)).....▶	10000.00	30080.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10000.00	30080.15

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	7952.33	10052.33
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7952.33	10052.33
22. Transfers to Affiliated/Other Party Committees.....	0.00	5000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12000.00	15000.00
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).....	2000.00	7675.00
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)) ..	21952.33	37727.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21952.33	37727.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	10000.00	25000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	25000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7952.33	10052.33
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7952.33	10052.33

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
<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)
Building and Restoring the American Dream Fund

A. NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

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

Mailing Address 66 CANAL CENTER PLAZA
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00089458

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
 05 / 15 / 2020

Transaction ID : SA11C.4850

Amount of Each Receipt this Period
5000.00

Memo Item

B. SCALISE FOR CONGRESS

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

Mailing Address PO BOX 23219

City JEFFERSON State LA Zip Code 70183

FEC ID number of contributing federal political committee. **C** C00394957

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 / 25 / 2020

Transaction ID : SA11C.4858

Amount of Each Receipt this Period
5000.00

Memo Item

C.

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

Mailing Address

City State Zip Code

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City
Bethesda

State
MD

Zip Code
20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C
Transaction ID : SB21B.4791
Amount of Each Disbursement this Period
400.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Campaign Financial Services

Mailing Address PO Box 30844

City
Bethesda

State
MD

Zip Code
20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 11 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4848
Amount of Each Disbursement this Period
400.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Campaign Financial Services

Mailing Address PO Box 30844

City
Bethesda

State
MD

Zip Code
20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 09 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4851
Amount of Each Disbursement this Period
400.00

Memo Item

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

1200.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Campaign Financial Services

Mailing Address PO Box 30844

City
Bethesda

State
MD

Zip Code
20824

Purpose of Disbursement
PAC Compliance Consulting

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	2	0

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.4857
Amount of Each Disbursement this Period
[REDACTED] 22.50

Memo Item

Full Name (Last, First, Middle Initial)

B. The Townsend Group

Mailing Address 1006 Pendelton Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
PAC Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	0

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.4787
Amount of Each Disbursement this Period
[REDACTED] 4303.68

Memo Item

Full Name (Last, First, Middle Initial)

C. The Townsend Group

Mailing Address 1006 Pendelton Street

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
PAC Fundraising Consulting

003

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	2	0

FEC Identification Number

C [REDACTED]
Transaction ID : SB21B.4810
Amount of Each Disbursement this Period
[REDACTED] 1526.15

Memo Item

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

5	8	5	2	.	3	3
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TOTAL This Period (last page this line number only)..... ▶

5	8	5	2	.	3	3
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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)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati

State OH

Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

003

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 20 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4800
Amount of Each Disbursement this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati

State OH

Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

003

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 20 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4849
Amount of Each Disbursement this Period
300.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Wuellner, Maggie, , ,

Mailing Address 3422 Custer Street

City Cincinnati

State OH

Zip Code 45208

Purpose of Disbursement PAC Fundraising Consulting

003

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2020

FEC Identification Number

C
Transaction ID : SB21B.4852
Amount of Each Disbursement this Period
300.00

Memo Item

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

900.00

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

7952.33

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. ANDY BARR FOR CONGRESS, INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	0

Mailing Address PO BOX 2059

City LEXINGTON State KY Zip Code 40588

FEC Identification Number

C C00467571

Purpose of Disbursement
PAC Political Contribution

011
Category/
Type

Transaction ID : SB23.4841

Amount of Each Disbursement this Period

1000.00

Candidate Name

BARR, GARLAND ANDY, , ,

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

State: KY District: 06

Memo Item

Full Name (Last, First, Middle Initial)

B. BRIAN FITZPATRICK FOR CONGRESS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	0

Mailing Address PO BOX 939

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

C C00607416

Purpose of Disbursement
PAC Political Contribution

011
Category/
Type

Transaction ID : SB23.4829

Amount of Each Disbursement this Period

1000.00

Candidate Name

FITZPATRICK, BRIAN, , ,

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

State: PA District: 01

Memo Item

Full Name (Last, First, Middle Initial)

C. COLLINS FOR SENATE, INC.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	0

Mailing Address PO BOX 1295

City GAINESVILLE State GA Zip Code 30503

FEC Identification Number

C C00736983

Purpose of Disbursement
PAC Political Contribution

011
Category/
Type

Transaction ID : SB23.4804

Amount of Each Disbursement this Period

1000.00

Candidate Name

Collins, Doug, , ,

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

State: GA District: 09

Memo Item

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

3000.00

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)
Building and Restoring the American Dream Fund

A. DON BACON FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 391368

City OMAHA State NE Zip Code 68139

Purpose of Disbursement
PAC Political Contribution

Candidate Name
BACON, DONALD J, , ,

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

State: NE District: 02

Date of Disbursement: 05 / 06 / 2020

FEC Identification Number: C00575167
Transaction ID : SB23.4821
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. FRIENDS OF DENVER RIGGLEMAN, INC.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 798

City NELLYSFORD State VA Zip Code 22958

Purpose of Disbursement
PAC Political Contribution

Candidate Name
RIGGLEMAN, DENVER LEE MR. III, , ,

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

State: VA District: 05

Date of Disbursement: 05 / 06 / 2020

FEC Identification Number: C00680488
Transaction ID : SB23.4847
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. KATKO FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 228 S WASHINGTON ST STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
PAC Political Contribution

Candidate Name
KATKO, JOHN M, , ,

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

State: NY District: 24

Date of Disbursement: 05 / 06 / 2020

FEC Identification Number: C00556365
Transaction ID : SB23.4814
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 3000.00

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)
Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial) A. MAST FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 06 / 2020
Mailing Address PO BOX 3016		FEC Identification Number C 000632257 Transaction ID : SB23.4837
City STUART	State FL	Zip Code 34995
Purpose of Disbursement PAC Political Contribution	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name MAST, BRIAN, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	
State: FL	District: 18	

Full Name (Last, First, Middle Initial) B. MCCAUL FOR CONGRESS, INC		Date of Disbursement MM / DD / YYYY 05 / 06 / 2020
Mailing Address 815-A BRAZOS ST PMB 230		FEC Identification Number C 000392688 Transaction ID : SB23.4833
City AUSTIN	State TX	Zip Code 78701
Purpose of Disbursement PAC Political Contribution	Category/Type 011	Amount of Each Disbursement this Period 1000.00
Candidate Name MCCAUL, MICHAEL, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 10	

Full Name (Last, First, Middle Initial) C. MIKE GARCIA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 05 / 06 / 2020
Mailing Address 1451 QUAIL STREET, SUITE 101		FEC Identification Number C 000701102 Transaction ID : SB23.4811
City NEWPORT BEACH	State CA	Zip Code 92660
Purpose of Disbursement PAC Political Contribution	Category/Type 011	Amount of Each Disbursement this Period 500.00
Candidate Name GARCIA, MICHAEL, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Memo Item <input type="checkbox"/>
Disbursement For: 2020	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General	
State: CA	District: 25	

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

2500.00

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. RODNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement PAC Political Contribution

Candidate Name
DAVIS, RODNEY L, , ,

Office Sought: House Senate President

Disbursement For: 2020
 Primary General Other (specify) ▼

State: IL District: 13

Date of Disbursement: 05 / 06 / 2020

FEC Identification Number: C00521948
Transaction ID : SB23.4843

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. TAYLOR FOR CONGRESS 2020

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1284

City VIRGINIA BEACH State VA Zip Code 23451

Purpose of Disbursement PAC Political Contribution

Candidate Name
TAYLOR, SCOTT W. MR., W., ,

Office Sought: House Senate President

Disbursement For: 2020
 Primary General Other (specify)

State: VA District: 02

Date of Disbursement: 06 / 19 / 2020

FEC Identification Number: C00733394
Transaction ID : SB23.4853

Amount of Each Disbursement this Period: 500.00

Memo Item

C. VALADAO FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 5132 NORTH PALM AVENUE #227

City FRESNO State CA Zip Code 93704

Purpose of Disbursement PAC Political Contribution

Candidate Name
VALADAO, DAVID, , ,

Office Sought: House Senate President

Disbursement For: 2020
 Primary General Other (specify) ▼

State: CA District: 21

Date of Disbursement: 04 / 29 / 2020

FEC Identification Number: C00499392
Transaction ID : SB23.4801

Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. ZELDIN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 47 FLINTLOCK DRIVE

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement PAC Political Contribution

Candidate Name ZELDIN, LEE M, , ,

Office Sought: House Senate President
State: NY District: 01

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement: 05 / 06 / 2020

FEC Identification Number: C00552547
Transaction ID : SB23.4825

Amount of Each Disbursement this Period: 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	12000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Building and Restoring the American Dream Fund

Full Name (Last, First, Middle Initial)

A. French for Justice

Mailing Address 100 South Third Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement PAC State Political Contribution

Category/Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4808
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Kennedy for Ohio

Mailing Address 260 N Cassady Ave

City Columbus State OH Zip Code 43209

Purpose of Disbursement PAC State Political Contribution

Category/Type

Candidate Name

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

State: District:

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB29.4809
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 D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Townsend Group			Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 1006 Pendelton Street			
City Alexandria	State VA	Zip Code 22314	

Outstanding Balance Beginning This Period <input type="text" value="4303.68"/>		Transaction ID : SD10.4786	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="4303.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

Outstanding Balance Beginning This Period <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"/>	

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